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ABSTRACT

The manual provides a curriculum for training volunteers in state protection and advocacy agencies, with particular emphasis on training volunteer advocates who have direct relationships with developmentally disabled people. The curriculum consists of five training sessions, each lasting about 2 1/2 hours. Following an introductory section with information on how to use the manual, trainer's responsibilities, room arrangement, training techniques, warmup activities, and a checklist of things to do before each session; five sections contain guidelines for sessions with the following headings (subheadings in parentheses): orientation to advocacy (welcome and introductions, the advocate within the local program, the advocate and local program within the advocacy movement, being an advocate); developmental disabilities (identifying attitudes, myths and their consequences, facts about developmental disabilities, the advocate's responsibilities); communication (identifying the needs, two way communication, effective listening, nonverbal communication, communication with developmentally disabled persons); assertiveness (verbal assertiveness, nonverbal assertiveness, learning to say "no," wrap up, teaching your protege to be assertive, expressing positive feelings); and taking action (identifying community resources, determining priorities, interviewing, writing letters, making a prepared statement, negotiating). The first page of every session gives an overview of the session and a list of necessary materials and preparations. Also contained are background materials, worksheets, masters for transparencies or charts, information on training activities, and resources. (SB)

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Action Through Advocacy

A Manual for Training Volunteers

ED201129

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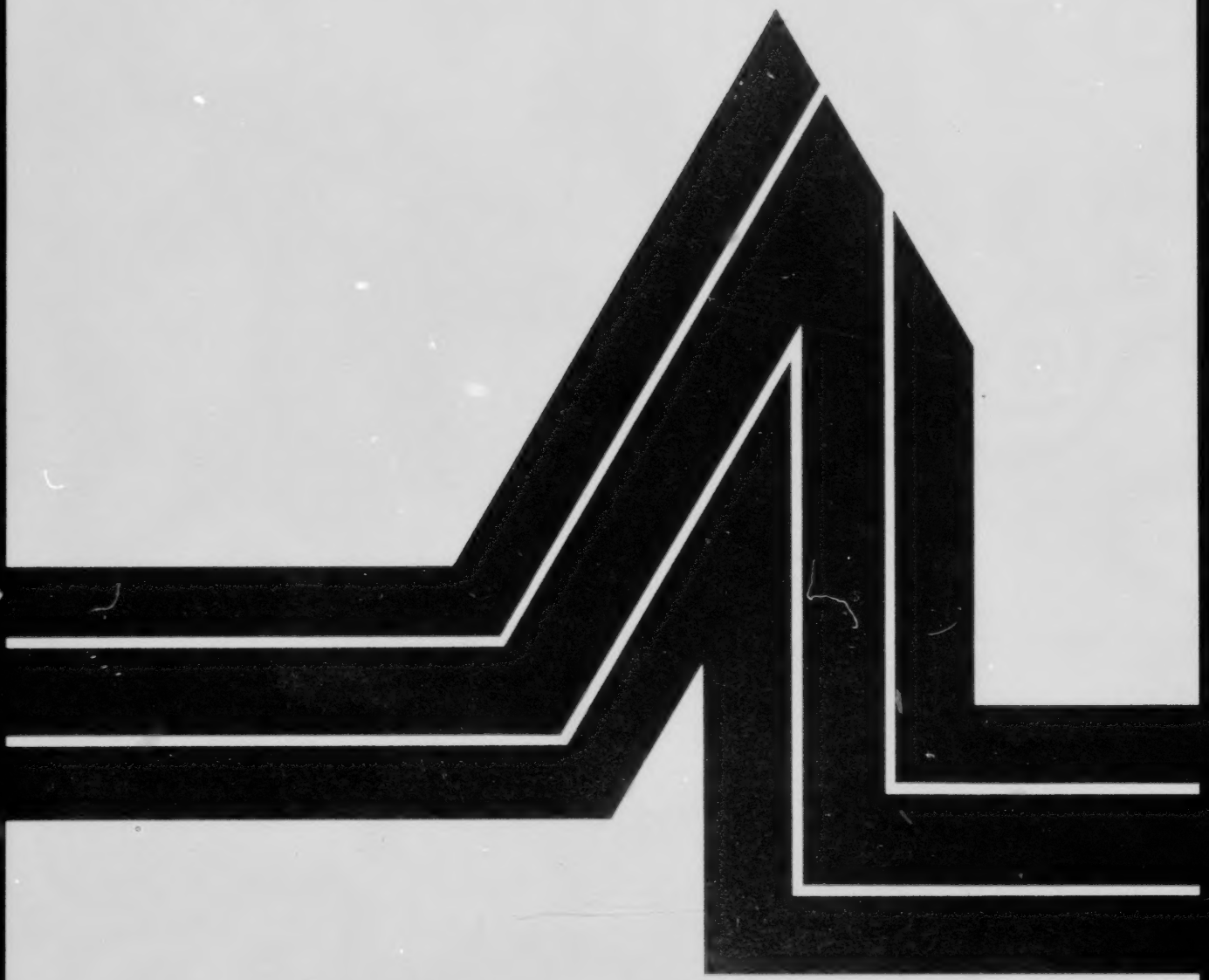
This curriculum is part of a series of materials developed by the Research and Training Center in Mental Retardation at Texas Tech University to support the use of volunteers in state protection and advocacy agencies for developmentally disabled persons. Other materials in the series are *Citizen Advocacy Resources* (an annotated list of resource materials and organizations) and *Citizen Advocacy: How To Make It Happen* (a manual for administrators of volunteer programs).

Tips for Trainers



Tips for Trainers

How To Use the Manual

Purpose and audience

This manual provides a curriculum for training volunteers in state protection and advocacy (P&A) agencies. In particular it is useful for training those volunteer advocates who have direct relationships with developmentally disabled people. These may be volunteers in citizen advocacy programs, who are matched one-to-one on a long-term basis with "proteges," or developmentally disabled people with unmet needs for friendship or practical assistance. The curriculum is also suitable for training volunteers in other types of advocacy programs. These volunteers may have a one-time, short-term relationship with a developmentally disabled person in order to solve a particular problem. The term "clients" is used in the curriculum to refer to developmentally disabled people in this type of relationship.

The broad goal of the training is to give volunteer advocates knowledge of developmental disabilities and of the advocate's role, an understanding of the attitudes that affect the lives of developmentally disabled persons, and basic skills in communication, assertiveness, and taking action for change.

Because advocacy programs are so varied in structure and in the ways they use volunteers, one main aim in curriculum design has been flexibility. A second aim has been to keep the costs of training minimal for the programs. To meet both aims, a single manual has been prepared, including both instructions for trainers (on colored paper) and background materials and worksheets that the trainer can copy inexpensively for trainees (on white paper). This design allows a trainer to individualize the curriculum according to the needs and purposes of the advocacy program. If some of the background materials are not suitable for that particular program, the trainer can omit some materials or substitute others. A trainer can also easily add materials, such as program newsletters, brochures, or facts about services in the city or town where the advocacy program is located. The set of handouts that a trainee collects during the five training sessions thus accurately and completely reflects the program for which he or she is training.

Trainer's instructions

Instructions on how to conduct the training sessions and the activities within the sessions are printed on colored paper. The left column provides an outline so that a trainer can see at a glance the sequence of activities. The wide column provides detailed instructions. The wide right margin is for trainer's notes.

The first page of every session gives an overview of the session and a list of necessary materials and preparations.

Each session is further divided into parts, including related activities on a single topic. The parts of each session also begin with an overview page.

Detailed instructions for activities that are used frequently (brainstorming, "I learned" statements, panel discussion, and role playing) appear in this introductory material and are not repeated.

Background materials

Background materials, printed on white paper, are a reference for the trainer. They can also be copied for trainees and used as handouts. Background materials are placed in the manual directly after the instructions for activities that are based on the materials. The trainer can remove them from the manual for copying.

These background materials are labeled "handout" and are given numbers for easy reference (for example, #3a is the first handout for Session Three). Trainers who are using the handouts selectively may want to cover this label before copying and use their own numbers so that trainees will have sequentially numbered handouts.

Usually trainers will distribute the entire set of background materials for a session at the end of the session with the instruction that trainees read them at home in order to review the ideas and exercises presented during training. Passing them out as a set will minimize the disruption of frequent distributions and will prevent trainees from being distracted by the printed information while training activities are taking place. Occasionally instructions will call for distributing some handouts during the session.

Worksheets

Also printed on white paper for easy reproduction are worksheets that trainees use during the training session. These are also labeled "handout" and are numbered. They are distributed during the session as they are used.

Folders or binders

Providing trainees with a folder or ring binder will help them keep the handouts together. The materials will then be easily available, and trainees will be likely to use them as a reference after training is completed. Heavy paper folders with pockets will work well. Trainers who use ring binders will have to copy handouts on paper with holes or provide a paper punch.

Transparencies or charts

Some of the materials on white paper, labeled "transparencies or chart," are to be used when it is important to have the whole training group focusing on an idea or illustration. If an overhead projector is available, the charts can be made into transparencies inexpensively on most copy machines. The charts are enlarged as they are projected. Overhead projectors can usually be borrowed from schools or churches. An alternative is for the trainer to print or draw the materials on a large piece of paper which can be displayed in the meeting room.

Training activities

The training activities have been planned to encourage group members to participate actively and to practice the skills presented. They draw on and show respect for the trainees' diverse life experiences. Lecture is minimal except where the main purpose of a segment of training is to present information.

The activities are organized assuming that a trainer will use all of them in sequence (except where options are noted). However, trainers should feel free to delete some exercises and add others according to the needs of their own groups. A trainer may be as creative and flexible in conducting the sessions as in selecting materials.

Training sequence

The curriculum consists of five training sessions, each lasting about 2½ hours. The first two sessions, "Orientation to Advocacy" and "Developmental Disabilities," primarily present information. The final three sessions, "Communication," "Assertiveness," and "Taking Action," have the main purpose of building skills.

There are some advantages to using the first two sessions before matching a volunteer with a protege (in a citizen advocacy program) or before giving a volunteer a role assignment (in volunteer advocacy programs other than citizen advocacy). The information in these initial sessions helps the volunteers decide for certain whether they want to become advocates and it helps them approach their matches or assignments confidently. Observing the volunteers in training also gives program staff insight into the volunteers' strengths and needs, which helps the staff make appropriate matches or role assignments.

Some programs will also advantageously use the third session, "Communication," before matching advocates. However, volunteers may become impatient if they are delayed from beginning to act as advocates any longer than two or three sessions.

If advocates have some experience in their advocate roles before the final three sessions, they will be likely to relate the ideas presented in those sessions to their own experiences and to practice the skills that are taught. Their experience will give them a natural interest in the topics and motivation to learn.

The first two sessions should be offered as often as there is a small group of new volunteers who need training before they are matched with proteges or assigned roles. The final three sessions may be offered less regularly during the year to combined groups of advocates. It takes less of the trainer's time if some of the small groups can be combined for the final three sessions. And, spreading the advocates' training over a longer period of time keeps the contact between the advocate and the staff regular. This contact can be very important in follow-along.

Because volunteers can lose enthusiasm if they have to wait too long for training and assignments after expressing

interest in the program, ideally they will complete the first two sessions within 2 weeks or 1 month from the time they first express interest. (If training cannot be offered that regularly, programs will benefit from involving the volunteers in some way while they wait for training.) Depending on the nature of their assignments, advocates may take as long as a year to complete Sessions Three, Four, and Five.

Trainer's Responsibilities

Before each session

1. Become familiar with the purpose and content of every session in the training program.
2. Write down an outline of the topics you expect to cover and the points you want to make.
3. Inform all participants as well as the board and staff of the date, time, place, and subject of training, in plenty of time for them to arrange their schedules.
4. Make any necessary arrangements for renting or using a meeting room, equipment, and materials.
5. Be personally responsible for seeing that all material and equipment arrives at the room where the session will be held.
6. Arrive at the meeting room early. Allow enough time to:
   a. Put material to be handed out in a place where it is easy to find. You don't want to take time fumbling in a briefcase or box to look for things after the meeting begins.
   b. Set up any audiovisual equipment you will be using. Projectors and recorders should be plugged in and tested to be sure they are working. Be sure you know where light switches are if you plan to dim the lights. Bring along extra extension cords and an extra bulb for your projector.
   c. Prepare refreshments. If you plan to serve coffee or other beverages, make sure they will be ready at the proper time and be sure that there are enough cups or glasses.
   d. Place pencils and papers at each person's place so people can take notes.
   e. Arrange the chairs and tables in the way you want them.
7. Finish the above tasks in time to be ready to greet people as they arrive. Some people will arrive at least 15 minutes before the starting time so allow yourself plenty of time. It is better to have a few minutes to sit down and catch your breath than to be caught arranging chairs and breathlessly racing around the room.
8. If you are leading the session with other people, divide these duties carefully and specifically.
9. Start the session on time.

During each session

1. Plan the opening few minutes carefully. If it is the first time the group has met, you will need to devise some kind of introductions. See the warm-up activities below. At later meetings you can start with a summary of previous sessions and an explanation of the purpose and agenda of this session.
2. Try to get each member of the group participating actively early in the session, but don't insist if a group member is uncomfortable.
3. Do not imply that there is a right answer or that trainees are being challenged or tested. Use open-ended questions such as "Does anyone have an idea?" or "How might you handle this?" or "What experience have you had?" This form of questioning is not threatening and does not imply there is a correct answer.
4. Whatever the quality of an individual's participation, do not criticize it. Find some way to be supportive and encouraging.
5. The trainer's role is to facilitate the discussion, not to dominate it. One bad habit of some trainers is to constantly comment on, correct, or improve the contributions of trainees.
6. Make an effort to draw out quiet group members but not to the point of making them uncomfortable. You might ask a quiet person a very simple question with an easy answer. Success will help build the person's confidence.
7. Try to prevent one or two persons from dominating the session. Let different people do the demonstrations and role playing, and encourage participation by asking individuals, "What has your experience been?" or "What do you think about _____?"
8. If you need to divide the group into smaller groups, there are several ways to accomplish this quickly:
   a. Probably the simplest way is to count off and have all one's in a group, all the two's in a second group and so on.
   b. If group members have pre-registered and you know their names, you can prepare nametags ahead of time on different colors of paper or with a colored dot, a number, or a letter on the tag and divide according to the classification you have chosen. This is a good technique if you have people coming from different areas and you would like to arrange the groups to provide a certain mix.
9. Hold to your agenda and move on to the next subject when it is time.
10. Do not allow the session to get out of hand. If a group member asks a question or wants to talk about something that is off the subject, cheerfully but firmly say that the group can take that up at the end of the

session. Always leave time at the end of the session for questions and comments and don't let a trainee go away feeling frustrated because a burning problem was not dealt with. If a trainee has a problem that would be of no interest to the rest of the group, you might suggest that the person stay for a few minutes after the session and you can discuss it then.

11. Treat the group members with respect and be open to feedback from them about your performance.

Room Arrangement

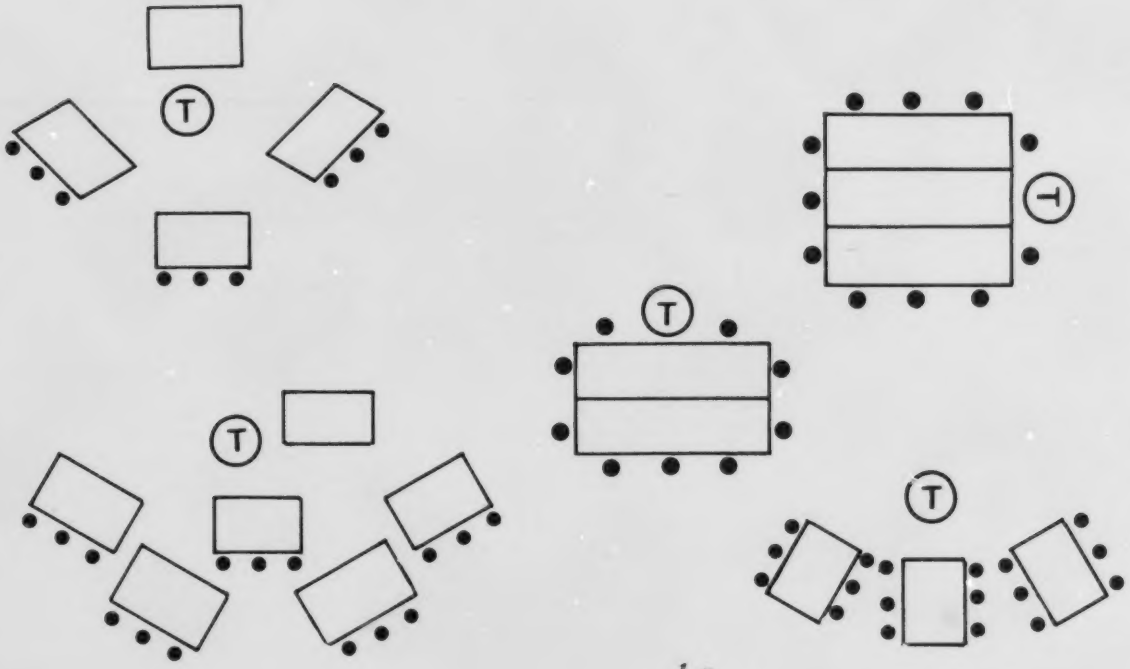
Arrange the room so that it will help people feel comfortable and encourage easy interaction between group members. Tables are helpful if the trainees are going to do exercises which require pencil and paper and if they have several pieces of paper and a coffee cup to keep up with.

Arrange the chairs and tables to make the setting as informal as possible and so that there is as much face-to-face interaction as possible.

People do not want to feel that someone is talking down to them. Stand or sit on the same level as the group, not on a stage or behind a lectern. There should be no physical barriers between the trainer and the trainees.

Make sure that the temperature in the room is comfortable and that the lighting is good.

Here are some ideas for informal, small group arrangements using tables and chairs:



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Training Techniques

Brainstorming

Brainstorming is a spontaneous outpouring of ideas from all members of the group on a stated topic. It is effective in groups of five to fifteen people. Ideas are recorded as rapidly and noncritically as possible. Brainstorming can be used to stimulate group discussion or to identify alternatives when a group needs to make a decision.

Arrange for one person in each group to serve as a recorder. The recorder writes down ideas as fast as they are presented by the other group members.

The leader states the problem. Only one topic should be considered at a time. The leader should make clear what the ground rules are and stress that the rules are to be rigidly observed.

The ground rules are:

1. Present only positive ideas.
2. Do not comment on any idea presented.
3. Do not discuss ideas during the brainstorming period.
4. Do not criticize any ideas.
5. Present ideas as rapidly as they come to mind.
6. Express any idea that comes to mind. No idea is too far out.
7. "Hitchhike"—add to or revise ideas suggested by other group members. For example, brainstorming the topic, "What are ways to get advocates?", someone might say, "better recruitment." Someone else could hitchhike by adding, "recruit at schools," "recruit at service clubs," and so forth.

Stop when ideas begin to lag.

"I learned" statements*

"I learned" statements are used to provide the group and the trainer with feedback about an activity they have just completed or at the end of a training session. The statements help clarify and reinforce what the group members have learned. It can also help to crystallize new learning and make group members aware of the learning that is taking place.

The trainer prepares a chart with the following sentence stems. The chart may be posted permanently in the room, or it may be posted just when it is to be used. The chart says:

I learned that I . . .
I discovered that I . . .
I noticed that I . . .
I relearned that I . . .
I realized that I . . .
I was pleased that I . . .
I was displeased that I . . .

*NOTE. The "I learned" statements exercise is from *Values Clarification: A Handbook of Practical Strategies for Teachers and Students*, by Sidney B. Simon, Leland W. Howe, & Howard Kirschenbaum, pp. 163-165, and is reprinted by permission of A & W Publishers, Inc. (95 Madison Avenue, New York, NY 10010). Copyright © 1972; copyright © 1978.

After an activity or a discussion, the trainer asks group members to think for a minute about what they have just learned or relearned about themselves or their values. They are to use any one of the sentence stems to share with the group one or more of their feelings. Trainees are not called on, but volunteer to speak whenever they feel comfortable about it.

Sometimes it is helpful the first time around to have trainees write down a few "I learned" statements before sharing them aloud. It is also helpful if the trainer provides trainees with one or two examples of "I learned" statements ("I realized that I was not listening but trying to get my own point across" or "I was pleased that I was able to improve my ability to hear what the other person was saying").

Do not allow discussion to interrupt the free flow of "I learned" statements; it tends to destroy the mood and intensity of the activity. Statements should be kept short and to the point. Trainees should not attempt to explain or defend their statements.

Help group members focus on personal rather than on general, intellectualized learnings. There is a tendency to say, "I learned that people . . .," rather than "I learned that I . . .."

Reassure the group that there are no right answers. People should always have the freedom to pass the activity without saying anything.

If the trainer thinks it advisable, he or she may break up the group into small groups of three to five members and have these people share and discuss the "I learned" statements with one another.

Panel

A panel is usually composed of three to five people. These people have special knowledge about a common subject. Each one prepares a brief presentation on an assigned topic and responds to questions from the audience. A moderator conducts the panel.

Each panelist should know why he or she has been invited and what specific information he or she is to share with the group. Panelists should also be told who else will be on the panel and what topics other members have been assigned. They will also be interested in knowing about the audience—what their backgrounds are, how well informed they are about the topic, and why they are attending the session.

When inviting panel members to speak, send a simple instruction sheet to each panelist. Give all pertinent information on the procedures to be used, what is expected of each person on the panel, and time allotted for each speaker. Usually with a panel of four people, each panel member should speak for 5-7 minutes. Stress that time limits are firm.

The moderator of the panel should be someone with skills in leading and facilitating discussions. The moderator need not be an authority on the subject being discussed. One of the moderator's responsibilities is to keep the panel running smoothly. The moderator should signal when the speaker's time is up and, if necessary, interrupt a speaker who exceeds the time limits unreasonably.

A briefing session either the day before or just before the program will give the moderator a chance to make sure all panelists have understood and acted on the instructions sent to them. During this time, each panelist should briefly review his or her presentation. (Don't do a complete "dress rehearsal" or you will lose some spontaneity.) The moderator should make clear the order of the presentations and discussion and carefully define the time constraints.

The person who is presiding at the meeting or training session introduces the moderator, and the moderator introduces the members of the panel. The moderator explains to the audience how the panel discussion will proceed and tells them that they will have an opportunity to ask questions when all panel members have finished their presentations.

Role playing

Role playing is acting out a situation with group members taking the roles of different characters. It can be used to illustrate interpersonal problems, to promote better understanding of an idea or another person's feelings, or to practice a skill.

The trainer may prepare written descriptions of the role play situation, including some of the facts and the feelings and opinions of the characters. All characters may have the same role description; or use individual descriptions when all the characters would not be expected to know the same facts. The facts and roles may also be presented orally.

Each person should have a few minutes to study the situation or to think about the character he or she has been assigned.

You can break the training group into small groups and have simultaneous role plays on a given situation. Or some members of the group can do the role play while others observe. If there are several groups, they should all begin role playing at the same time.

When casting parts, be sensitive to the strengths and weaknesses in the group. Asking for volunteers for the parts may be a good way to begin. Try not to have someone play a part in which that person would be uncomfortable or which would highlight a person's negative characteristics. If possible, give the role with the unappealing character to someone in the group whose importance and popularity are unquestioned.

Let the role play continue until it has provided the information or understanding that the group is seeking.

Warm-up Activities

Introducing partners

Arrange the chairs in a semicircle.

Distribute pencils and 3 x 5 cards to each participant.

Divide the group so that each person has a partner. Ask each person to find out some information about the other in order to introduce the partner to the group. Each person will have 2 minutes to find out the information from the other. In addition to the usual demographic information, participants should try to find out one unusual thing to tell about the person. After 4 minutes, go around the circle and have each person introduce his or her partner to the whole group.

Personality pie

Distribute pencils and the sheet, "Let's Get Acquainted" (next white page), to each member of the group.

Give the participants a few minutes to fill out the information about themselves on their sheets.

Ask the participants to circulate around the room and try to find people with matching information on their sheets.

After 10 minutes find out if any people in the room had one match, two matches, or more.

Spinning "yarns"

Seat the group in a semicircle.

Show the group a piece of yarn about a yard long. Each person in turn, beginning with the trainer, tells the group what interested him or her in the advocacy program. A person speaks only as long as it takes to wind the yarn around the index finger.

Trainer's introductions

If the group is small and if you know something about each person, go around the room and introduce each member. Keep the introductions light and look for something interesting other than the usual facts about employment and family.

Geography*

Ask the group members to move to the center of the room and imagine that the classroom represents a map of the U.S.A. Then ask a series of geography questions. Following each question, the trainees are to move to a location on the "map." For example, you might ask, "Where were you born?" Trainees who were born in the midwest would move to the center of the room, and so on. There, they are instructed to find partners and to share for 2 minutes something about their experience at their birthplace, other places they have lived, and so forth. Other questions are:

1. Where is a place you would like to live for a year?
2. Where is the most beautiful place?

3. Where is a place that something important in your life happened?
4. If you had to choose a place to retire, and money were no problem, where would you go?

What's in your wallet?*

Instruct the participants to take three things from their wallets or purses. They place the three items on the table and begin thinking about what they will tell the group about what any or all of the objects mean to them.

Then give each participant in turn a chance to say something about his or her life as evidenced by the items carried, day in and day out, in the wallet.

Either/or*

Explain that you will ask some either/or questions; to answer, group members will move to the side of the room you designate for the choice. For example, if you ask, "Which do you identify with more, a Volkswagen or a Cadillac?", group members move to the side of the room indicated for Volkswagens or for Cadillacs. They find a partner on the side chosen and discuss for a few minutes the reasons for the choice. Then everyone returns to the center of the room, the trainer gives another either/or choice, and the participants again choose between the two alternatives by moving to the appropriate side of the room. Repeat the process with five or six questions. Instruct group members to find a new partner each time. Sample either/or questions follow.

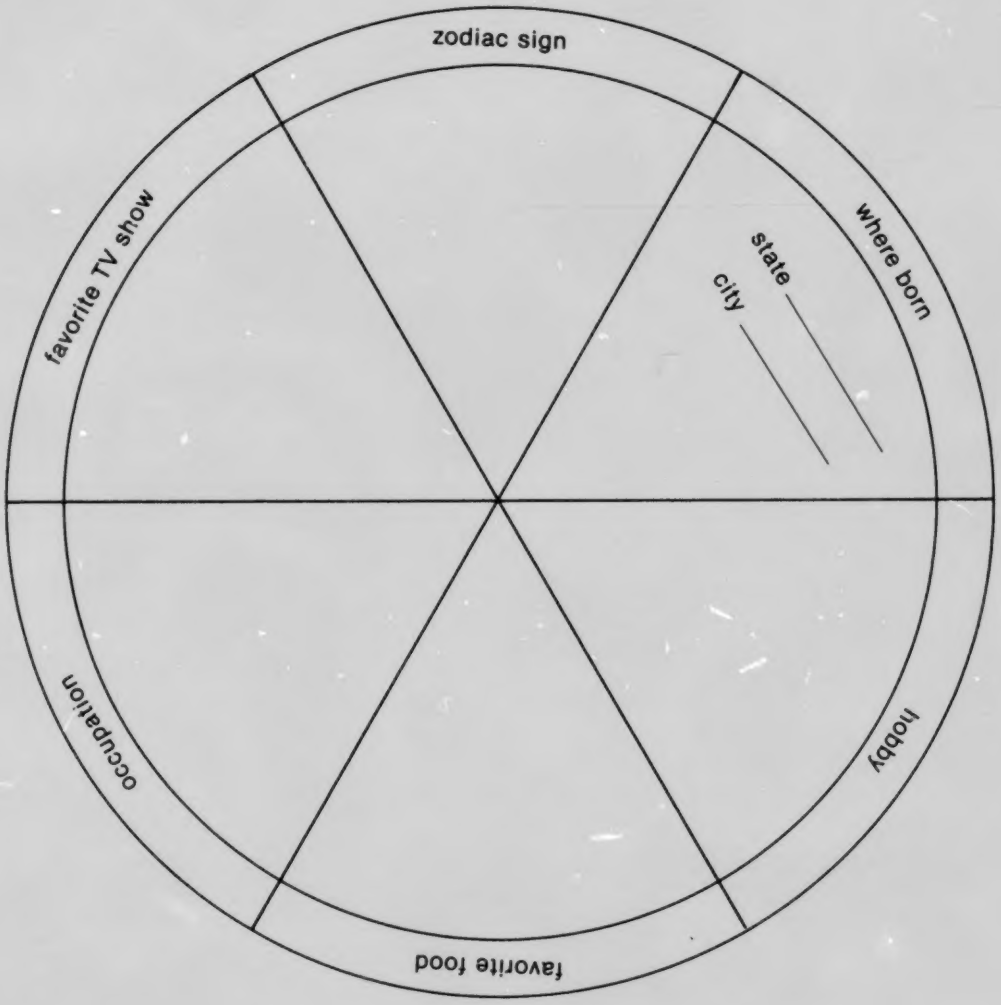
Are you:

1. More of a saver or a spender?
2. More like New York City or Colorado?
3. More like a rose or a daisy?
4. More like breakfast or dinner?
5. More like summer or winter?
6. More yes or no?
7. More political or not political?
8. More like the country or the city?
9. More like the present or the future?
10. More of an arguer or an agree-er?
11. More like patent leather or suede?
12. More like a gourmet or a McDonald's fan?
13. More like a rock band or a baroque string quartet?

*NOTE. These activities are adapted from *Values Clarification: A Handbook of Practical Strategies for Teachers and Students*, by Sidney B. Simon, Leland W. Howe, & Howard Kirschenbaum, pp. 112, 329, 94, and is reprinted by permission of A & W Publishers, Inc. (95 Madison Avenue, New York, NY 10016). Copyright © 1972; copyright © 1978.

Let's get acquainted

Name _____

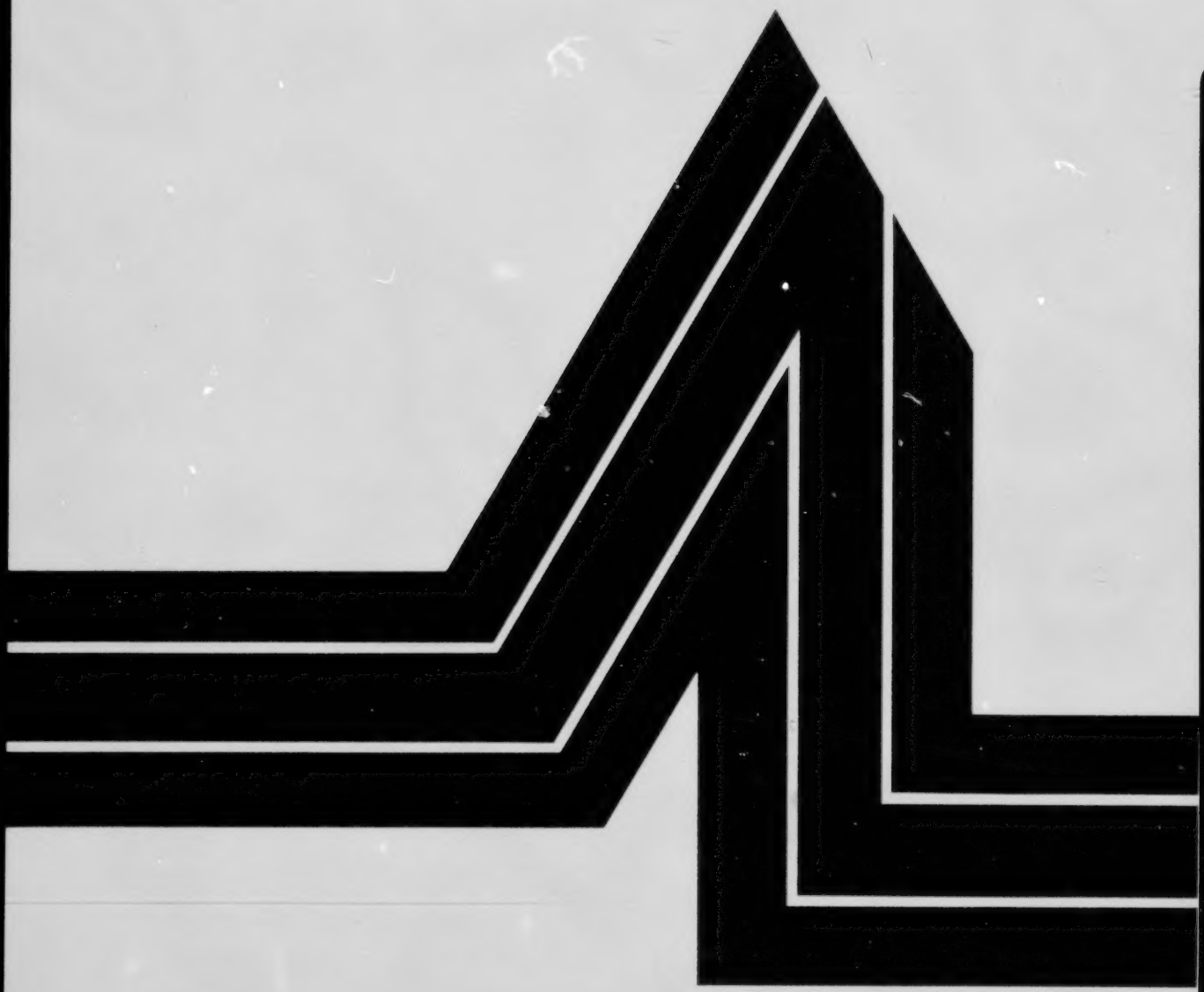


Checklist of Things to Do Before Each Session

Meeting room	_____	Reconfirm that the meeting room will be available.
	_____	Be sure the chairs and tables are arranged the way you want them.
Materials	_____	Check material to be handed out to be sure it is complete.
	_____	Count the copies of handouts to be sure you have enough.
	_____	Arrange the material in the order you will be using it.
	_____	Check to be sure you have all transparencies, charts, and other teaching aids.
	_____	Put note paper and a pencil at each participant's place.
	_____	Be sure you have your felt tip pen or chalk large tablet for easel displays if necessary masking tape if necessary note pad
Equipment	_____	Set up any audiovisual equipment you will be using and check to be sure it is working.
	_____	Set up a screen if necessary.
	_____	Set up an easel if necessary.
Refreshments	_____	For coffee: coffeepot, coffee, cups, cream, sugar, spoon
	_____	For tea: hot water, tea bags, cups, cream, sugar, spoon
Staff, volunteers, board members	_____	Inform staff, volunteers, and board members of the training. If any of these people are participating in the training, be sure they understand their roles.

Session One

Orientation to Advocacy



Session One

Orientation to Advocacy

Purposes

To introduce group members and establish group identity

To define advocacy

To explain and illustrate what advocates do

To define roles and responsibilities of advocates and of the program staff

Rationale

Potential advocates attending this session are wondering primarily what their involvement will entail. They have some very practical questions in mind, such as how much time it will take, what their responsibilities will be, whether they have the skills to work closely with a handicapped person, and what kind of assistance they can expect from the staff. Therefore, the session focuses on advocacy from the advocate's point of view.

Topics, methods, and schedule

Part One: Welcome and Introductions

- Welcome (5 minutes)
- Warm-up activity (15 minutes)

Part Two: The Advocate Within the Local Program

- Brainstorming: Definitions of advocacy (10 minutes)
- Panel discussion: What advocates do and how the program helps (20 minutes)
- *Or:* film or slide show
- Question and answer period (10-20 minutes)

Break

Part Three: The Advocate and Local Program Within the Advocacy Movement

- Brainstorming: Why developmentally disabled people need advocates (15 minutes)
- Paper-and-pencil exercise: Matching terms and definitions of advocacy (15 minutes)

Part Four: Being an Advocate

- Trainer's presentation and handouts: Roles and responsibilities of advocates (15-30 minutes)
- Small group sharing: Why be an advocate? (10 minutes)

Materials

Pencils, paper, and nametags for group members

Easel, pad, felt tip pen, masking tape

Or: blackboard, chalk

Slide or film projector, screen, extension cord, and projection stand (if you will be using audiovisual materials)

Materials as needed for a warm-up activity

Handouts

Folders for group members

#1a, "Protection and Advocacy"

#1b, "Citizen Advocate-Protege Activities"

#1c, "Volunteers . . ."

Program materials, such as newsletters, brochures

Preparations

Invite three or four people to be on a panel, each preparing a 5-minute presentation; discuss topics for their presentations.

Optional: Arrange to rent or borrow film.

Inform training group members and program staff, advocates, and board members of the training and the roles you expect them to perform, if any.

Prepare any handouts that differ from those in this package.

Make copies of handouts #1a, #1b, and #1c (and others you have prepared) for group members.

Print the topics for brainstorming on large sheets of paper, one topic per page.

Part One: *What is advocacy?*

Who is an advocate?

Why does someone advocate?

Part Three: *People with physical or mental handicaps often need advocates because . . .*

An organized program can help make advocacy effective because . . .

Volunteers make good advocates because . . .

Session One, Part One

Welcome and Introductions

Purpose	To get group members acquainted with one another and with some of the people in the program
Method	Group activities
Materials	See description of warm-up activities in "Tips for Trainers" for needed materials
Welcome 5 minutes	The coordinator of the advocacy program opens the session by welcoming the members of the group. The coordinator then introduces the chairperson of the governing board or advisory board, who also welcomes the members of the group and acknowledges the board's appreciation for these volunteers. If the coordinator is not going to be the trainer, then at this time the coordinator introduces the trainer. The trainer explains that the main purpose of this training session is to help participants get a good understanding of what they can expect to do as advocates. The trainer leads the rest of the session.
Warm-up 15 minutes	See "Tips for Trainers" for examples of activities to use. The warm-up activities will help group members become comfortable with one another as they begin to work together in the training activities. Advocacy staff persons who are present should participate.

Session One, Part Two

The Advocate Within the Local Program

Purpose	To explain what advocates do
Methods	Brainstorming Panel discussion or audiovisual presentation
Materials	Pencils and paper for group members Felt tip pen or chalk Large sheets of paper and easel or blackboard with topics for brainstorming

Brainstorming

Advocacy

15 minutes

Explain that the word "advocacy" is a common word that means something to all people, whether or not they have heard about protection and advocacy for developmentally disabled people. The word has many different meanings and does not necessarily mean the same thing to all people.

To get group members participating mentally and verbally in the training, ask them to brainstorm meanings of advocacy.

If the training group is larger than eight persons, divide into smaller groups of four to eight people for brainstorming.

Point out the large sheets of paper or blackboard on which you have written the questions for brainstorming:

What is advocacy?

Who is an advocate?

Why does someone advocate?

If you are using sheets of paper, place them on easels or tape them with masking tape to the walls.

Follow the rules for brainstorming in "Tips for Trainers."

Ask the groups to brainstorm the questions one at a time. Be sure that they understand that they are to offer as many ideas as they can think of and that they are not to judge or criticize any of the ideas offered. Ask each group to select one person to act as recorder to write down the ideas as they are called out.

Give the groups 10 minutes to brainstorm. You and other program staff can float among groups, participating as necessary. As much as possible, let the groups work on their own. After 10 minutes, or sooner if you sense the impetus sagging, bring the groups together to share some of their ideas. Different groups will have gotten on different tracks and they will have different points of view that will enrich the concept of advocacy. But there will be common themes; note these as they discuss their ideas.

As a whole group, discuss responses of the small groups to the three questions. If there has been only one brainstorming group, wait until brainstorming is complete before discussing the responses.

Write brief notes by your questions on the pad or blackboard to indicate the range of ideas about advocacy. For example, by the question, "What is advocacy?", your notes may read, *speaking up for someone or something, interceding, helping, agitating,* or *going to court.* By the question, "Who is an advocate?", you may write, *lawyer, student, parent, friend, real estate agent,* or more generally, *anyone who represents his or her own or another person's interests.* The question, "Why does someone advocate?", may yield responses such as these: *to help, to bring about change,* or *to protect rights.*

Your group's responses may be quite different from these examples. Do not try to force them to reach these conclusions.

Panel discussion

What advocates do and how the program helps

20 minutes

(option 1)

Chances are the potential advocates in your training group have had limited contact with active advocates, program staff, or disabled people. Many will have met only the coordinator during an interview. Therefore, their concept of advocacy and what an advocate does is somewhat abstract. A panel discussion at this point, or alternatively an audiovisual presentation, will make the concept of advocacy more concrete. It will also suggest some additional ideas for the definition of advocacy.

A panel discussion lets group members meet people involved in the advocacy program and lets them hear firsthand how different people participate.

Read the suggestions for composing and monitoring a panel discussion in the section on training techniques in "Tips for Trainers."

Consider including on your panel an advocate, client or protege, the program coordinator, and a board member. Topics for them to discuss are described below.

Advocate

The advocate may talk about typical activities with a protege or client; difficulties and solutions; rewards; what being part of the advocacy program has meant personally.

The advocate should be as specific and concrete as possible, referring to actual events ("last Thanksgiving we cooked a turkey together") rather than general feelings ("we share interests and enjoy each other's company").

The theme and structure of the advocate's presentation might be a typical outing or interaction: for example, how it was initiated; what preparations took place; transportation; who else participated, if anyone; any happenings of special interest, difficulty, humor, or warmth; how it concluded.

Or, the advocate might give highlights of one particular problem and the steps taken to resolve it.

The advocate, if possible, should relate his or her remarks to the definitions of advocacy suggested during brainstorming.

Client or protege

The presentation may cover why having an advocate was important or necessary, what was needed (for example, a friend, someone to help with a discrimination case); what was gained; any limits or disappointments in advocacy.

Like the advocate, the client or protege should be as concrete as possible, perhaps discussing these topics with regard to a specific problem or activity.

The client or protege does not have to be articulate or of normal intelligence nor does he or she have to prepare a brief formal talk.

An alternative to such a presentation could be to have an advocate and his or her client or protege recall and discuss together some recent activity. If the advocate has to prompt the protege or client or use special techniques to keep his or her attention, this will be a good learning experience in interacting for the potential advocates in the training group.

The advocate may make some summarizing remarks.

In selecting a client or protege, avoid those with highly personal relationships. Do not make him or her an object of display or embarrassment.

Coordinator

The coordinator should focus on the relationship of staff to the volunteers rather than on the program and its theory and history. Topics could include matching, follow-along and other support available, and the coordinator's role in the match.

The coordinator should make his or her remarks concrete and relate them, as possible, both to the ideas suggested by trainees in brainstorming and to the remarks by advocate and client or protege. For example, in discussing follow-along, the coordinator can refer to a time when he or she helped the matched pair. On the topic of matching, the coordinator can explain the basis for matching these particular people.

Board member

This person should cover the duties of the board; who is on it (types of representation, such as consumers and professionals, are more important than names); how it relates to paid staff and to advocates; when and where it meets. The board member may welcome all advocates to attend board meetings.

Moderator

The moderator should be someone other than the trainer because different voices and different faces add variety to the meeting. The moderator does not need to be an authority on the subject being discussed. The job of the moderator is not to participate, but to lead the panel and audience to a satisfying discussion.

The trainer introduces the moderator, who then introduces all of the panel members. The moderator next explains how the panel will proceed. The moderator suggests to the people in the audience that they may make notes and that they will have a chance to ask questions when the panel is finished. The moderator must interrupt any panel member who greatly exceeds time limitations.

When the panelists have completed their individual presentations, the moderator accepts questions from the audience.

Audiovisual presentation

(option 2)

In place of a panel discussion (but probably not in addition to it because of time constraints) have available a film or slide show that illustrates your advocacy program. Possibilities for an audiovisual presentation include:

1. **Slides and narration of people who are working in your program.**
   Have someone take pictures of several advocates and clients or proteges together as well as activities of the advocacy office and special events. The coordinator, public relations person, or other person can tell about the program using the slides for illustration.

2. **"Justice and the Art of Gentle Outrage"**
   This 16-minute, 1978 film by the Association for Retarded Citizens illustrates a citizen advocacy relationship, giving close-up pictures of some proteges and explaining the reasons for citizen advocacy.
   Free rental
   ARC Publications, PO Box 6109, Arlington, TX 76011

3. **"Something Shared"**
   This 14½-minute film by the Association for Retarded Citizens, produced in 1974, describes citizen advocacy, focusing more than "Justice and the Art of Gentle Outrage" on expressive, or friendship, relationships and less on the advocate helping to solve practical problems.
   Free rental
   ARC Publications, PO Box 6109, Arlington, TX 76011

4. **"Our Place" in *Rights Now***
   This slide show was prepared in 1979 for use in training mildly and moderately retarded people to know and to exercise their rights and responsibilities in voting, employment, interpersonal relations, and independent living. It can also be used to illustrate some of the

particular problems a retarded person faces living in the community and how an advocate can help. Available from each state P&A agency; sharing policies differ in states.

5. **"Come in from the Rain"**
   This 15-minute color film gives an overview of protection and advocacy systems and the developmentally disabled people they serve.
   $200 purchase; free rental
   South Carolina P&A T & TAP, 111 Church Street, Charleston, SC 29401

6. **"Citizen Advocacy"**
   This series of six slide/tape vignettes depicts actual advocates participating in a variety of advocacy roles, including those of guardian, spokesperson, and service delivery monitor.
   Georgia Advocacy Office, 1447 Peachtree Street, NE, Suite 811, Atlanta, GA 30309

7. **"Reaching Out Through Advocacy"**
   This 15-minute color film centers on the citizen advocacy coordinator's activities including recruitment, screening, training, and guidance of advocates.
   $200 purchase; free rental
   South Carolina P&A T & TAP, 111 Church Street, Charleston, SC 29401

Question and answer period

10-20 minutes

This is the time for group members to ask the questions they have wondered about before coming to the training session and the questions that have been stimulated by the brainstorming and the panel or audiovisual presentations.

Panel members should try to answer all questions directly, honestly, and briefly but thoroughly. Try not to put anyone off, but it is legitimate to defer questions on topics you will cover fully in a later training session (such as questions on characteristics of the developmental disabilities) as long as you explain why you are deferring and perhaps give a brief, preliminary answer.

Break

10-15 minutes

This break is important to let group members refresh themselves and get better acquainted with one another.

Session One, Part Three

The Advocate and Local Program Within the Advocacy Movement

Purposes

To explore how developmentally disabled persons can benefit from having advocates and from the advocacy program

To define the various types of advocacy programs that work together for developmentally disabled people

Methods

Brainstorming

Paper-and-pencil exercise

Materials

Large sheets of paper and easel or blackboard with topics for brainstorming

Felt tip pen or chalk

Handout #1a, "Protection and Advocacy"

Pencils

Folders for group members

Brainstorming

Advocacy and handicapped people

15 minutes

When you call the group back after the break, help them collect their thoughts by pointing out that thus far you have as a group explored when and how advocacy occurs in everyone's life and how in particular it occurs within the advocacy program. At this point it is appropriate to think about why people with mental or physical handicaps in particular need advocates and an advocacy program.

If the whole training group has developed good group feeling and if it is not too large, you may choose to do this brainstorming as one group. Otherwise, break into small groups and follow the procedure for brainstorming in Part One. Write the responses that group members offer during brainstorming under the topics.

The topics for brainstorming and possible responses are:

People with physical or mental handicaps often need advocates because

- their problems are greater
- sometimes their abilities are lower because of handicaps or because of feelings of inferiority and a habit of submissiveness
- society creates physical and attitudinal barriers
- society has excluded and separated them; therefore, they lack experience in normal human interactions
- their rights have been limited

An organized program can help make advocacy effective because

the program organizes advocacy so that it won't happen just by chance

a program makes advocacy available to more people

a program has more resources than an individual

a program helps assure the continuity of advocacy

Volunteers make good advocates because

they have different resources and skills to meet different needs

they can have personal relationships with the handicapped person, a relationship which may be lacking for people whose only associates are paid staff

they have fewer conflicts with the interests of the clients or proteges than paid staff of a program because staff have loyalties to their employer and want to keep their jobs

they bring enthusiasm, expertise, and caring

Responses of your group do not necessarily have to reflect these sample responses. Some of the ideas, for example, the idea of conflict of interest, may not be easy for a group new to advocacy to come up with. You may wish to present some key ideas directly.

Paper-and-pencil exercise

"Protection and Advocacy" #1a

15 minutes

Pass out handout #1a ("Protection and Advocacy"). Explain that the discussions thus far have shown that advocacy needs are diverse and that advocacy occurs in many different forms. This handout will define some of the different types of advocacy that are formalized for handicapped people. It will give a broad picture of the advocacy network and where the local program fits in.

If you want to add other definitions that are appropriate to your particular advocacy program, such as *institutional advocacy, ombudsmanship,* or *case management advocacy* you may do so by typing directly on the handout sheet before copying.

Ask the training group members to read the definitions and fill in the appropriate term from the list at the top of the page. Or, read the definitions and fill in the terms as a group.

When they have finished (in about 10 minutes), go over each term and add any comments that are appropriate or answer any questions.

The correct answers to handout #1a are, in order:

advocacy
protective services
self advocacy
citizen advocacy
systems advocacy
legal advocacy
protection and advocacy (P&A) system

Discuss in more detail the type of advocacy your program does and how it relates to the other types.

The training group members can keep their completed forms for future reference in the folders that you have purchased for them. Hand out the folders at this time. Explain that the trainees can keep all their advocacy materials in the folder and bring them back to each training session.

Protection and Advocacy

Match the term with the definition below. Write the term in the blank above the definition.

legal advocacy	protection and advocacy (P&A) system	systems advocacy
self-advocacy		advocacy
protective services	citizen advocacy	

1. _____
Speaking and acting on behalf of oneself or another person or a cause.

2. _____
Services which assist individuals who are unable to manage their own resources or to protect themselves from neglect, exploitation, or hazards. Examples of such services are outreach and referrals, counseling, case management and follow-along, guardianship, financial support, legal aid, and housekeeping assistance.

3. _____
Representing one's own rights and interests and seeking solutions to a problem by oneself. This form of advocacy is the goal of all other forms of advocacy.

4. _____
A one-to-one relationship between a mature, competent volunteer and a developmentally disabled person in which the advocate defends the rights and interests of the disabled person and provides emotional support. This relationship occurs within the framework of a structured advocacy system.

5. _____
Influencing social and political systems to bring about change for groups of people. Usually a coalition of people, but sometimes an individual, will seek changes, such as changes in laws, establishing group homes where there have been none, or arranging for the removal of architectural and transportation barriers.

6. _____
Litigating and legislating to establish the legal rights of developmentally disabled persons and to insure that those rights are not violated. This form of advocacy may be used to benefit individuals or classes of people.

7. _____
A nationwide system to protet and advocate the rights of persons with developmental disabilities. Each state is mandated by Section 113 of the 1975 Developmental Disabilities Act to have a protection and advocacy agency. Most statewide agencies fulfill their mandate through several advocacy approaches, such as legal advocacy, systems advocacy, citizen advocacy, self-advocacy, and information and referral.

Session One, Part Four

Being an Advocate

Purposes

To explain to training group members the specific roles and responsibilities of advocates

To encourage them to conceive of themselves as advocates

Methods

Trainer's presentation and discussion

Small group sharing

Materials

Handout #1b, "Citizen Advocate-Protege Activities"

Handout #1c, "Volunteers . . ."

Program materials, such as newsletters and brochures

Trainer's presentation and discussion

Thus far in training, group members have learned what advocates do locally and how their work relates to other types of advocacy. Some people are still trying to decide whether to become advocates; others are committed but haven't decided exactly what role they want. This part of training will help them learn exactly what the different roles involve and help them imagine themselves as advocates.

It is important to individualize this part of the training according to the structure and purpose of your advocacy program. If the handouts provided in this training package do not suit your particular program, provide training group members with copies of comparable forms and information.

Some general information handouts, such as "Advocate Responsibilities and Resources," "Advocate Guidelines," and the "Activity Report" are reserved until Session Two of the training, because some potential advocates at this point would be overwhelmed by the responsibilities and liabilities of advocates.

The procedure for each handout is the same: pass out the handout, go over the handout with group members and give them a chance to ask questions, and suggest that they review the materials before the next training session.

Volunteer roles

Potential advocates need information on the possible roles they may choose as well as an overview of the different roles volunteers perform within the program. Because of the diversity of advocacy programs and advocate roles, descriptions of volunteer advocate roles are left to the programs. If yours is a citizen advocacy program in the Wolfensberger model, you might want to discuss the different types of expressive and instrumental, formal and informal roles (see *A Multicomponent Advocacy/Protection Schema,* by Wolf Wolfensberger, or "Matching" in *Citizen*

Advocacy: How To Make It Happen, published by Texas Tech University). If your program uses volunteers as paralegals or in other roles, you might highlight different types of cases volunteers have worked on and explain the roles they have filled.

"Citizen Advocate-Protege Activities" #1b

The activities on this handout were described by active citizen advocates from all over the United States and show some varied and imaginative ideas for activities. You may want to supplement the list by telling about some of the things that advocates and proteges do in your particular community. You can do this verbally or by making your own list and attaching it to this one. As they read the handout, ask the volunteers to think about which of the activities they would like to do. Suggest that they keep this handout in their folders as a resource for when they are matched with proteges and need ideas for things to do.

Newsletters, brochures, other program materials

Materials you have prepared for public awareness or information exchange will help potential advocates identify with the program and will establish the viability of the program.

"Volunteers . . ." #1c

A copy of this handout can help make the participants leave the training session with good feelings about volunteering and about a program that respects what volunteers give. Another use for the handout is to display it in the advocacy office.

Newsletters, brochures, other program materials

Materials you have prepared for public relations or information exchange will help potential advocates identify with the program and help establish the viability of the program.

Small group sharing

Why be an advocate?

5-10 minutes

Before the small group sharing begins, announce the time, place, and topics for the second training session.

Break the whole group into smaller groups of four to eight.

Potential advocates have received a lot of information during this session and perhaps have not yet been able to relate it to themselves personally. A chance to share with a few other group members how they feel about what they have heard will help put the focus of the training session on the people themselves and let them leave with feelings of importance and a sense of bonds with others present.

These small group sharing sessions are different from brainstorming in their search for feelings rather than ideas. No notes are taken, and there is no report to the group as a whole. Participants should feel free to share their concerns as well as their hopes.

Questions the groups might ask themselves are:

> Why be an advocate? What do you hope to give? to gain?
>
> How has your idea about advocacy grown during the session? What ideas have changed?

Let the groups disband as their sharing seems complete.

As participants leave, thank them warmly for coming and let them know you hope to see them at the second training session.

Citizen Advocate-Protege Activities

Here is what some active advocates have done with their proteges.

Last Sunday we went to church, had lunch, and took a drive in the country.

We went out to lunch and went shopping.

I kept score for her bowling team, then we shopped and ate out together.

We attended a college football game.

We went roller skating and had coffee and dessert before going to a dance for mentally retarded citizens.

We attended the recognition evening together.

I counselled her in problems she was having in school.

We went on a picnic.

We took a walk and I introduced her to my neighbor.

I met with him and his social workers to go over plans for day services and eventual plans for his leaving his present residential facility.

I helped give her a birthday party.

I played games with her and took her to see Santa Claus.

We toured the public library and got books to read. We plan to return and take out a library card for her.

We went to a concert.

We spent Saturday morning cocking.

We went to a local fair.

We wrapped Christmas gifts and also will make Christmas decorations this month.

We talked a lot together about relationships with men. We then went to a movie together involving different kinds of relationships, roles of women, etc.

We went to the zoo.

I had him over for dinner and then watched TV.

I recommended that he apply for SSI and assisted him in doing so. I informed parents of their rights at the Parent Education Training meeting. I have encouraged parental participation in all matters concerning their child.

We worked with money.

We went to Special Olympics.

I showed home movies of vacations because she had indicated she had not been many places outside of our city.

I pushed him around town in his wheelchair and we took turns taking pictures with his camera.

We saw a play at the Heritage and Arts Center and went through the museum.

We made a gift for her mother. She spent two Saturdays at our home, stayed for meals—even helped by dusting the living room. Our entire family loves her. Even my 15-year-old son became understanding and caring.

I talked with her about getting a physical at the Health Department for birth control pills. We ate at McDonalds.

We watched a horror movie.

I helped her plan her first Thanksgiving dinner. This was the first dinner she had ever made. She decided what to have and how to prepare it and then shared it with a friend. Before she had always shared it with her family. She needed to start her own tradition.

We played basketball in the park.

We went window shopping.

We drove to the airport and watched the planes take off and land.

We experimented with a new haircut and makeup, styling hair and face according to a picture she chose.

We attended the dance at the institution where he lives.

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Volunteers. . .

Volunteers are like yachts.

No matter where they are, they arouse your curiosity. Who are they? Where do they come from? Why are they here?

They could stay moored where it's safe and still justify their being, but they choose to cut through the rough waters, ride out storms and take chances.

They have style. They're fiercely independent. If you have to ask how much they cost, you can't afford them.

Volunteers and yachts have a lot more in common these days. They're both a part of an aristocratic era that is disappearing from the American scene. They're both a luxury in a world that has become very practical.

Day by day, the number of volunteers decreases in this country as more and more of them equate their worth in terms of dollars and cents.

Three years ago I did a column on volunteers in an effort to point out that they don't contribute to our civilization. They ARE civilization—at least the only part worth talking about.

They are the only human beings on the face of this earth who reflect this nation's compassion, unselfishness, caring, patience, need and just plain loving one another. Their very presence transcends politics, religion, ethnic background, marital status, sexism, even smokers vs. non-smokers.

Maybe, like the yacht, the volunteer was a luxury. And luxuries are too often taken for granted.

One has to wonder. Did we, as a nation, remember to say to the volunteers, "Thank you for our symphony hall. Thank you for the six dialysis machines. Thank you for sitting up with a 16-year-old who overdosed and begged to die. Thank you for the hot chocolate at the scout meeting. Thanks for reading to the blind. Thanks for using your station wagon to transport a group of strangers to a ballgame. Thanks for knocking on doors in the rain. Thanks for hugging the winners of the Special Olympics. Thanks for pushing the wheelchair into the sun. Thanks for being."

Did the media stand behind them when they needed a boost? Did the professionals make it a point to tell them they did a good job? Did the recipients of their time and talent ever express their gratitude?

It frightens me, somehow, to imagine what the world will be like without them.*

. . . work for free but not for nothing.

*NOTE. From *At Wit's End* by Erma Bombeck . Copyright © 1975 by Field Enterprises, Inc. Courtesy of Field Newspaper Syndicate.

Session Two

Developmental Disabilities

Session Two

Developmental Disabilities

Purposes

To identify attitudes that currently shape the behavior of society and influence the services provided to developmentally disabled persons

To give volunteers insight into their own attitudes and practice in solving problems related to attitudinal barriers

To define developmental disabilities

To define guidelines for behavior and resources for advocates

To complete the "Advocate Interest Checklist"

Rationale

In order to represent the rights and interests of a developmentally disabled person, an advocate needs to understand the attitudes that affect behavior toward that person. Advocates also need to form positive attitudes themselves through awareness and information.

The process of screening volunteers and matching them with proteges or assigning roles is still taking place. Discussion of attitudes will also help the trainer spot strengths and potential problems of each advocate.

Topics methods, and schedule

Part One: Identifying Attitudes

- Paper-and-pencil exercise: Disability and social distance (15 minutes)
- Discussion and handouts: Where attitudes come from (25 minutes)
- Trainer's presentation and handout: Normalization (10 minutes)

Part Two: Myths and Their Consequences

- Worksheets and discussion: Myths and facts (15-30 minutes)

Refreshment Break

Part Three: Facts About Developmental Disabilities

- Trainer's presentation and handouts: Developmental disabilities (20 minutes)

Part Four: The Advocate's Responsibilities and Resources

- Trainer's presentation and handouts

Materials

Overhead projector and screen

Transparencies: "Myths about Developmental Disabilities"
"Facts about Developmental Disabilities"
"Advocates Can Help . . ."

Or: easel, pad, felt tip pen, masking tape, and charts

Pencils for group members

Handouts

#2a, "Disability and Social Distance" (worksheet and sample response)

#2b, "How Society Has Viewed Handicapped People"

#2c, "Normalization"

#2d, 1-8, myth/fact worksheets (front and back)

#2e, "Definition of Developmental Disabilities"

#2f, "Facts about Autism"

#2g, "Facts about Cerebral Palsy"

#2h, "Facts about Epilepsy"

#2i, "Facts about Mental Retardation"

#2j, "Advocate Responsibilities and Resources"

#2k, "Guidelines for Citizen Advocates"

#2l, "Periodic Advocate Report"

#2m, "Advocate Interest Checklist"

Optional. List of community resources

Note. Minimize the disruption of passing out papers by distributing these handouts in sets. Suggestions for doing so are given in the trainer's instructions for this session.

Preparations

Make transparencies of: "Myths about Developmental Disabilities"

"Facts about Developmental Disabilities"

"Advocates Can Help . . ."

Or: print these myths and facts on large sheets of paper

Make copies of handout #2a ("Disability and Social Distance") with the sample response on the back.

Make copies of other handouts.

Optional. Make fact sheets on disabilities not described here (such as vision and hearing impairments) if advocates need this information.

Optional. Make additional myth/fact situations if there are some commonly encountered by advocates.

Optional. Get copies of a community resources list if one is available; or make a brief list yourself.

Invite the advocacy program coordinator (if different from the trainer) to present Part Four of the session.

Session Two, Part One

Identifying Attitudes

Purposes

To make potential advocates aware of the attitudinal barriers developmentally disabled people confront

Methods

Paper-and-pencil exercise

Discussion and handouts

Materials

Pencils for group members

Handout #2a, "Disability and Social Distance" (worksheet and sample group response)

Handout #2b, "How Society Has Viewed Handicapped People"

Handout #2c, "Normalization"

Paper-and-pencil exercise

"Disability and Social Distance" #2a

15 minutes

Open the session by explaining that how we as a society act toward handicapped people, the programs we plan for them, and the opportunities we give them depend on our attitudes toward them. During this training session, the group will explore some personal and social attitudes and the reasons for them; the group will also consider the attitudes that make people create programs like advocacy.

Distribute the worksheet, "Disability and Social Distance" (#2a).

Ask the trainees to rank the 18 disabilities in the order of how socially acceptable the disability is. They should place a "1" beside the disability they find most acceptable and an "18" by the least acceptable disability. Assure them that this exercise is just for their own information and that they will not have to share their responses with the group. Give them about 10 minutes.

When they have completed their rankings, ask them to look at the reverse side of the worksheet to see how a sample group of 455 people ranked the disabilities. Begin a discussion of these results by asking, "What do you conclude by looking at these results?" or "What types of disability are most acceptable?"

Some possible conclusions are:

> Hidden physical disabilities (ulcer) are preferable to disabilities that can be seen (cerebral palsy).
>
> Physical disability is preferable to mental disability (such as mental retardation or the neurological disorders of cerebral palsy and epilepsy).

Your group may reach other conclusions.

Refer to the group's conclusions as you define "social distance" as the space—both physical and emotional—that we place between ourselves and anyone who seems undesirable or unacceptable. A person with an ulcer is probably as integrated in society as a person with no disability. But we segregate and exclude people with mental illness and mental retardation.

Conclude the discussion by pointing out that the distance society has placed between itself and people with certain disabilities (such as mental retardation, cerebral palsy, epilepsy, and autism) is one reason they need advocates. Advocates can help integrate developmentally disabled people into society.

Discussion and handout

"How Society Has Viewed Handicapped People" #2b

10 minutes

Pass out handouts #2b, "How Society Has Viewed Handicapped People," and #2c, "Normalization."

Without simply reading aloud, go over each of the eight views of handicapped people on #2b. Point out that labels or stereotypes and isolation (or "social distance") go together. When society views handicapped people as "menaces," "objects of dread," or "subhuman," it locks them up. Even the more positive stereotypes ("holy innocent") stress their difference from society. These stereotypes result in social distance.

Trainer's presentation and discussion

"Normalization" #2c

5 minutes

To introduce the concept of normalization, point out that thus far the group has been talking mostly about negative attitudes that exclude handicapped people from society. The normalization principle is replacing our policy of forcing handicapped people to be different and separate.

Read, or have someone else read, the entire paper, "Normalization" (handout #2c).

Ask for comments.

Point out that the normalization principle is the foundation for advocacy programs.

Disability and Social Distance

Exercise

Following is a list of 18 disabilities. Rank the disabilities, using the numbers 1-18, in the order of how socially acceptable you think they are, with #1 being the most socially acceptable and #18 being the least acceptable.

_____ Alcoholism

_____ Amputation

_____ Arthritis

_____ Asthma

_____ Blindness

_____ Cancer

_____ Cerebral Palsy

_____ Deafness

_____ Diabetes

_____ Epilepsy

_____ Ex-convict

_____ Heart Disease

_____ Mental Illness

_____ Mental Retardation

_____ Old Age

_____ Stroke

_____ Tuberculosis

_____ Ulcer

Disability and Social Distance

Sample Group Response

The following list represents the results from 455 people who were high school, college, or graduate students and rehabilitation workers:

1. Ulcer
2. Arthritis
3. Asthma
4. Diabetes
5. Heart Disease
6. Amputation
7. Blindness
8. Deafness
9. Stroke
10. Cancer
11. Old Age
12. Epilepsy
13. Cerebral Palsy
14. Tuberculosis
15. Ex-convict
16. Mental Retardation
17. Alcoholism
18. Mental Illness

NOTE. Reprinted, with permission of the publisher, from *Your Citizen Advocacy Program*, part 3, 1979. (Toronto: National Institute on Mental Retardation, 4700 Keele Street, Downsview, Ontario, Canada).

How Society Has Viewed Handicapped People

Over the ages, handicapped persons have been dehumanized in many different ways. Some of the stereotypes which have been used to label handicapped people persist in the mind of the public even today. Viewing a disabled person or group of handicapped persons according to a stereotype limits what we *expect* of them and how we respond to them. This should become clearer as we discuss some of the "historical" stereotypes.

The handicapped person as a "menace"

Between 1870 and 1925, all persons with disabilities were linked with poverty, crime, and promiscuity and were seen as contributing to the decline of civilization. Mentally retarded individuals in particular were viewed as threats to society. This view led to the segregation, imprisonment, persecution, and even destruction of thousands of handicapped persons. Placement in large custodial settings or "asylums," as they were called then, was common. Sterilization was widely used to prevent the spread of social problems through heredity.

The handicapped person as an "object of dread"

This view stems from the time when leprosy was a common dreaded disease. The first institutions were built in Europe to house lepers, after the Crusades. These prison-like buildings were placed well outside the cities, often on hilltops for the clean air. When leprosy declined, the "leprosariums" were quickly filled with society's misfits, disordered, and handicapped persons. The image of dread of the lepers was transferred to the new tenants.

The handicapped person as "subhuman"

This view is still encountered today, particularly where very severely handicapped persons are concerned. Such persons are often compared with "animals" or "vegetables." Simple amenities such as heat and regulation of water temperature may be ignored because the handicapped person is thought to be insensitive to heat or cold.

The handicapped person as an "object of ridicule"

Those who remember the movie *Charlie* or the book *Flowers for Algernon* will recall how the mentally retarded main character was the butt of frequent and humiliating jokes from co-workers. The appearance of handicapped persons in "freak shows" and circuses also illustrates this point. Historical novels show that disabled people were used as fools, court jesters, or clowns.

The handicapped person as an object of "pity" or "charity"

Until recent years, services (from education to clothing) were given to handicapped people out of pity or a sense of charity. Handicapped persons were even placed in the position of having to beg for survival. The pity and charity approach is still used in public fundraising campaigns.

The handicapped person as a "holy innocent"

This view characterizes handicapped persons as "holy innocents," "children of God," "special messengers," divine reminders to persons of their sins, but persons who are themselves incapable of sin and therefore not responsible for their own actions.

The handicapped person as an "eternal child"

The most common present misperception of mentally retarded persons is that mentally they are children forever. The tendency, then, is to expect them to behave like children. For example, an 18-year-old man may be expected to play with the same toys as a 6-year-old, when in fact he could be playing sports and learning vocational skills. Clothes, books, and possessions which are really more appropriate for children are often given to handicapped adults, and reinforce the juvenile stereotype.

The handicapped person as "sick"

A final stereotype and one which is also common today is the view of the handicapped person as sick—often mentally sick. This has led to an emphasis on medical treatment in hospital settings. Some disabilities, such as epilepsy, can be treated or controlled by drugs. But it is unrealistic to expect most handicaps to

NOTE. Adapted from *Your Citizen Advocacy Program*, 1976, by the National Institute on Mental Retardation (4700 Keele Street, Downsview, [Toronto], Ontario, Canada), and used by permission.

be totally overcome or "cured." Even so, all handicapped persons can be helped through better services and opportunities to achieve a measure of independence. Greater emphasis should be, and is being, put on education and rehabilitation, schools, vocational centers, and residential services. These non-medical services are more appropriate and will in the long run produce more direct benefits to the handicapped individual and to society.

The handicapped person as a citizen and developing individual

Fortunately, the old, degrading stereotypes are being replaced by a positive view of handicapped people. The handicapped person is increasingly seen as a *citizen*, entitled to full protection, rights, and privileges under the law. He or she is also entitled to the same services, opportunities, and benefits as other people.

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Normalization

NORMALIZATION MEANS . . . A normal rhythm of the day.
You get out of bed in the morning, even if you are
Profoundly retarded and physically handicapped;
You get dressed,
And leave the house for school or work,
You don't stay home;
In the morning you anticipate events,
In the evening you think back on what you have accomplished;
The day is not a monotonous 24 hours with every minute endless.

You eat at normal times of the day and in a normal fashion;
Not just with a spoon, unless you are an infant;
Not in bed, but at a table
Not early in the afternoon for the convenience of the staff.

NORMALIZATION MEANS . . . A normal rhythm of the week.
You live in one place,
Go to work in another
And participate in leisure activities in yet another.
You anticipate leisure activities on weekends
And look forward to getting back to school
Or work on Monday.

NORMALIZATION MEANS . . . A normal rhythm of the year.
A vacation to break routines of the year.
Seasonal changes bring with them a variety
Of types of food, work, cultural events, sports,
Leisure activities.
Just think . . . We thrive on these seasonal changes!

NORMALIZATION MEANS . . . Normal developmental experiences
Of the life cycle:
In childhood, children, but not adults go to summer camps.
In adolescence, one is interested in grooming, hairstyles,
Music, boy friends and girl friends.
In adulthood, life is filled with work and responsibilities.
In old age, one has memories to look back on, and can
Enjoy the wisdom of experience.

NORMALIZATION MEANS . . . Having a range of choices,
Wishes, and desires respected and considered.
Adults have the freedom to decide
Where they would like to live,
What kind of job they would like to have, and can best perform.
Whether they would prefer to go bowling with a group,
Instead of staying home to watch television.

NORMALIZATION MEANS . . . Living in a world
made of two sexes.
Children and adults both develop relationships
with
Members of the opposite sex.
Teenagers become interested in having
Boy friends and girl friends.
Adults may fall in love, and decide to marry.

NORMALIZATION MEANS . . . The right to normal
economic standards.

All of us have basic financial privileges, and
responsibilities
Are able to take advantage of
Compensatory economic security means,
Such as child allowances, old age pensions, and
minimum wage regulations.
We should have money to decide how to spend;
On personal luxuries, or necessities.

NORMALIZATION MEANS . . . Living in normal
housing
In a normal neighborhood.
Not in a large facility with 20, 50, or 100 other
people
Because you are retarded,
And not isolated from the rest of the community.
Normal locations and normal size homes will give
residents
Better opportunities for successful integration
With their communities.

—Bengt Nirje

NOTE. As quoted in *Orientation Manual on Mental Retardation: Part I*, rev. ed. (Toronto: National Institute on Mental Retardation, 1977), pp. 41-42. Reprinted by permission of the publisher.

Session Two, Part Two

Myths and Their Consequences

Purposes

To identify myths and facts about developmentally disabled people

To explore techniques of solving problems related to misinformation

Method

Paper-and-pencil exercises and group discussion

Materials

Myth/fact worksheets (handout #2d, 1-8)

Pencils

Overhead projector and screen

Transparencies: "Myths about Developmental Disabilities"
"Facts about Developmental Disabilities"

Or: Large pads on which you hand print these myths and facts

Worksheets and group discussion

Myths and facts

30 minutes

From the eight myth/fact situations included as worksheets for this session, select the ones that represent problems advocates and proteges or clients in your program are likely to encounter.

If there are other myths which your people often face, you can make additional worksheets in the same format.

Explain that people form attitudes on the basis of information (facts) and misinformation (myths). Attitudes in turn influence our behavior. Negative attitudes based on myths can lead to problems for handicapped people.

Distribute copies of the worksheets with side one facing up.

Place the transparency, "Myths about Developmentally Disabled People," on the overhead. (Or, display on the wall or easel a chart on which you have written the myths.)

Ask group members to identify the myths in each of the scenes on the worksheets by picking one of the myths on the chart or transparency for each scene.

Then, one at a time, go over the scenes, discussing facts and possible ways of solving the problems presented.

The suggestions from the group about problem solving approaches may well focus on what the advocate can do *for* the disabled person. For example, a group member may want to chew out the doctor for treating Mr. Todd like a child. This is a good time for you to do some attitude shaping. Point out the need for disabled people to become their own advocates and stress the dependency that will

result if advocates always solve the problems instead of giving their clients or proteges a chance to solve the problems themselves.

When your discussion of the myth/fact situations is complete, superimpose the "facts" transparency on the "myths" transparency on the overhead projector (or, display the chart you have printed on the easel or wall). It is important to let group members see the facts so that the myths won't be reinforced.

Draw this part of the session to a close by noting that these are only representative myths which developmentally disabled people deal with. Advocates must constantly be alert to discover when a myth or some misinformation is affecting a client or protege.

It is appropriate to reassure group members at this time about their own attitudes. Undoubtedly many of them have believed some of the myths presented. This is not a reason for shame. All people can learn and grow and change their attitudes; that is one purpose of this training.

Myths About Developmental Disabilities

1. ***Able-bodied people have an obligation to help disabled people.***

2. ***People with epilepsy are poor employment risks.***

3. ***People with mental retardation remain children forever.***

4. ***Disabled people are happier with people like themselves.***

5. ***A physical impairment affects all other functioning.***

6. ***Businesses, libraries, schools, and churches have no obligation to build special accommodations for disabled people.***

7. ***Autistic people are better off in institutions.***

8. ***People who are mentally retarded have abnormally strong sex drives which they can't control.***

Facts About Developmental Disabilities

Able-bodied people have an obligation to let disabled people help themselves. Giving help when it isn't needed increases dependency.

About 80% of people with epilepsy achieve full or partial control of their seizures with drugs. Their rates of absenteeism, job performance, and intelligence compare favorably with the general population.

People who are mentally retarded are people first and deserve the same dignity and respect that we give others.

Segregation is limiting. Disabled people, like all others, want the choice of where and how to participate.

A physical handicap does not imply a mental handicap; even with handicaps, people function capably in social, interpersonal, and work situations.

Wheelchair users have equal rights to access. A facility which is accessible to disabled persons is more usable by all persons.

Autistic people do not generally make progress in institutions. They need individual attention 24 hours a day in a natural environment.

People who are mentally retarded have the same sex drives and the right and need to love as anyone else.

Mr. Bill Todd is 28 years old and has Down's Syndrome. He is meeting with a doctor. Dr. Goodman says, "Billy, come into my office. Be a good boy and we will see what's the matter with you."

Identify the myth in this scene. _____

_____

What would you do if you were this person's advocate? _____

_____

What could Mr. Todd do? _____

_____

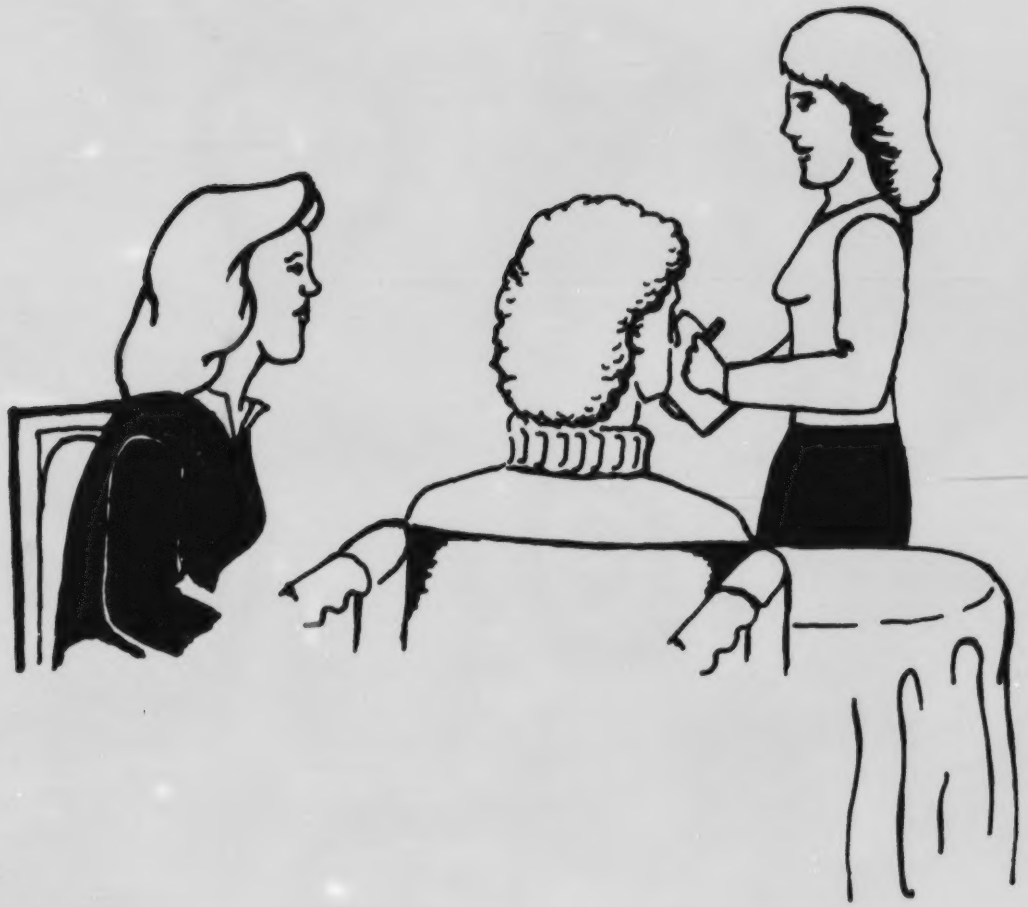
Myth: People with mental retardation remain children forever.

Fact: People who are mentally retarded are people first, last, and always. They are individuals as different from each other as you or I. They deserve dignity and respect—not pity, charity, or condescending treatment.

Mr. Todd is hurt and angry. He does not like being called Billy or being considered a "good boy." He thinks of himself as a man. He works, lives in an apartment, and has a girlfriend. He doesn't enjoy being treated or talked to like a child. He wishes Dr. Goodman would treat him just like any other patient. Mr. Todd can't understand why he is called "Billy," while every other man is called "Mr." in the doctor's office.

NOTE. Adapted from "Dignity," by the Regional Rehabilitation Research Institute on Attitudinal, Legal and Leisure Barriers (1828 L Street, NW, Suite 704, Washington, DC 20036), and used by permission.

Mark, a paraplegic in a wheelchair, is seated in a restaurant with his advocate, Ann. The waitress comes to take their order and asks Ann, "What would he like to order?"



Identify the myth in this scene. _____

_____

What would you do if you were the advocate in this scene? _____

_____

_____

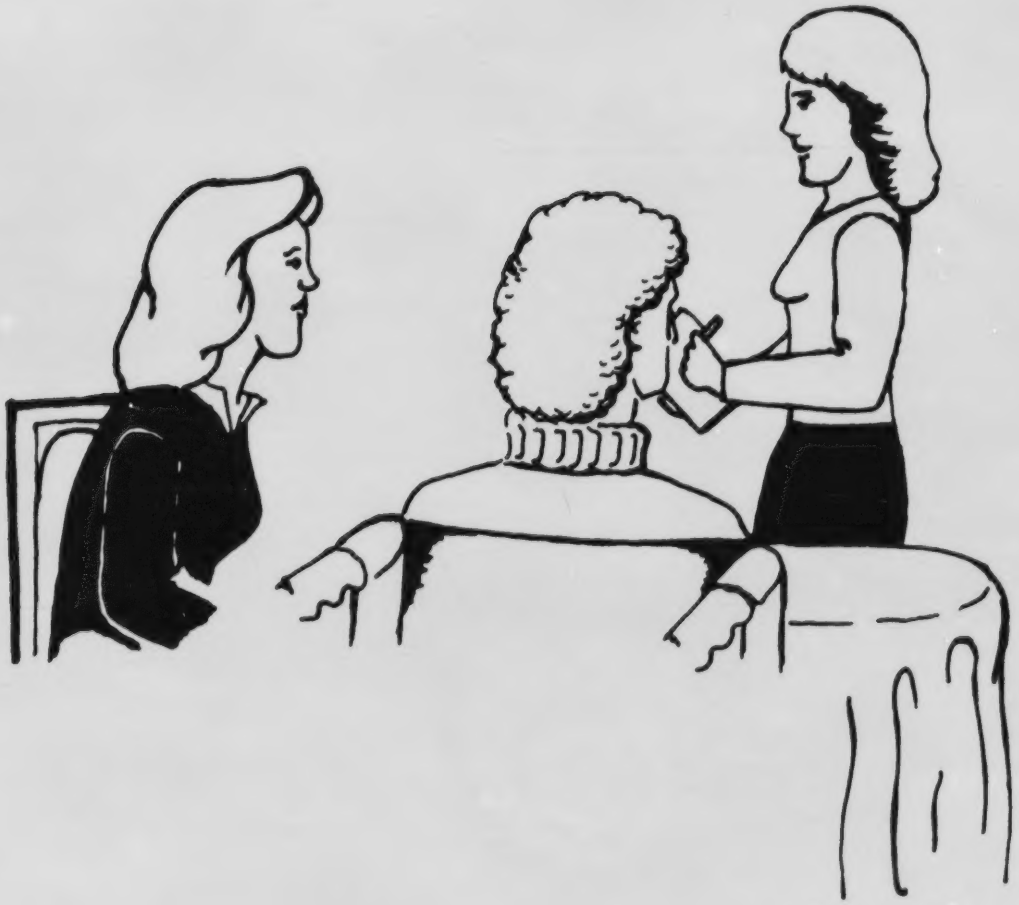
How would you prepare a disabled person to deal with this problem? _____

_____

_____

Myth: A physical impairment affects all other functioning.

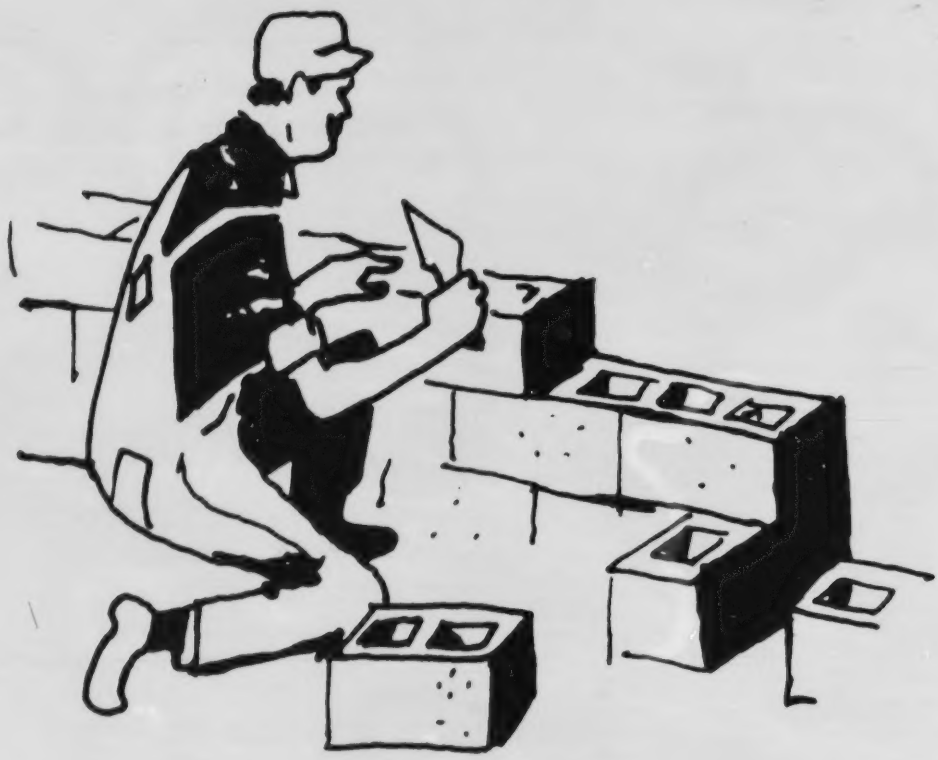
Fact: While some disabled people do have more than one impairment, one should never assume that this is so. Having a hearing impairment or using a wheelchair does not automatically signify a lack of intelligence. And, even people with limited intelligence have or can learn sufficient social skills to order a meal at a restaurant.



This example illustrates the attitude that because Mark is in a wheelchair he is helpless and unable to talk or order his dinner for himself. The situation may be complicated by the fact that the waitress feels uncomfortable with Mark and his chair; therefore she closes the line of communication with him by talking with his nondisabled advocate. This kind of attitude can be insulting and frustrating. Imagine how you would feel if this happened to you. The important thing to remember here is that even though a disabled person is with someone else, the companion is usually not an attendant, but a friend or business associate. The waitress's reaction created distance and discomfort for Mark and his advocate in what should have been a pleasant social situation.

NOTE. Adapted from "The Invisible Battle: Attitudes Toward Disability," by the Regional Rehabilitation Research Institute on Attitudinal, Legal and Leisure Barriers (1828 L Street, NW, Suite 704, Washington, DC 20036), and used by permission.

Joe is looking for a job as a bricklayer. He has 7 years of experience as a bricklayer and has good recommendations. The personnel officer at the construction firm where Joe applies is enthusiastic at Joe's interview and indicates that a job offer is likely. Joe completes the application form, which includes a medical history. Joe admits that he has epilepsy but notes that he has had no seizures in 5 years, when he began drug therapy. Later the personnel officer calls Joe and says he cannot offer Joe the job of bricklayer but does offer a job as mortar mixer, with a wage of less than half the wage a bricklayer makes. Joe suspects this his epilepsy is the reason he didn't get the bricklaying job, but he needs a job and is inclined to accept the mortar mixer's job.



What is the myth in this story? _____

What would you do if you were Joe's advocate? _____

_____

_____

Myth: People with epilepsy are poor employment risks.

Fact: About 80% of people with epilepsy achieve full or partial control of their seizures with drugs. Their rates of absenteeism, job performance, and intelligence compare favorably with the general population.

Many employers are poorly informed about epilepsy and are often frightened by it. They may needlessly avoid hiring a person because they think there is too much risk involved. Sometimes providing information will prevent this unnecessary discrimination. Only if there is demonstrable risk to a person's safety is epilepsy a legitimate reason to withhold employment. For example, a person with only partial seizure control should not work around dangerous machinery. But a person with full seizure control is no more an employment risk than anyone else. The personnel officer forgot about Joe's record as a bricklayer when he learned about the epilepsy. He should have hired Joe on the basis of his record, just as he would a person without a disability, rather than offering him an unsuitable job.

Jim and Joan Smith have a son with mild retardation, Charles, who is 16 years old. Joan Smith is visited by her neighbor, Mrs. Green. Mrs. Green tells Joan that she thinks the Smiths should put Charles in an institution because, now that he is older, he will only cause trouble in the neighborhood. Charles has no history of causing trouble and, in fact, is noted for being friendly and easy to get along with. Joan questions Mrs. Green more closely to find out what she means by "trouble." Mrs. Green tells her that she has heard that people who are retarded have abnormal sex drives and she is afraid that Charles will try to harm someone in the neighborhood.

Identify the myth in this scene. _____

_____

What would you do to help the Smith family if you were Charles' advocate? _____

_____

Myth: People who are mentally retarded have abnormally strong sex drives which they can't control.

Fact: People with mental retardation have the same needs and feelings as any other people. They do not have any stronger desires or needs than anyone else. Because people with mental retardation may be less inhibited about social interaction than others, openness and friendliness is often misinterpreted as being unnatural or frightening. This attitude is unfair and incorrect.

Mrs. Green shows a common attitude towards Charles. Mrs. Smith, although she is hurt and angry, will need to explain that myths about people with mental retardation and sex are based on misinformation and misconceptions.

NOTE. Adapted from "Dignity," by the Regional Rehabilitation Research Institute on Attitudinal, Legal and Leisure Barriers (1828 L Street, NW, Suite 704, Washington, DC 20036), and used by permission.

Fred has cerebral palsy and needs to wear a brace on one leg and use crutches in order to walk. One of his co-workers, Paul, always rushes around to open doors, get coffee, and rearrange chairs whenever Fred comes into the room.

Identify the myth in this scene. _____

_____

What does this scene tell you about being an advocate? _____

_____

Myth: Able-bodied people have an obligation to help disabled people.

Fact: Some disabilities may require a level of dependency upon other persons. In such cases, the disabled person will usually ask for help—as we all do now and again. But common courtesy and good sense dictate when and where help is needed. Nondisabled people have no intrinsic paternalistic duty to give pity, charity, or extraordinary assistance to persons with disabilities.

Paul should realize that Fred prefers to do as many things as possible without assistance. Paul should wait until Fred asks for help. Paul might offer assistance but he should wait until his offer is accepted before giving it. Giving help before it is accepted is rude. It can sometimes be unsafe as well, as when you grab the arm of someone using a crutch and the person loses his balance.

NOTE. Adapted from "The Invisible Battle: Attitudes Toward Disability," by the Regional Rehabilitation Research Institute on Attitudinal, Legal and Leisure Barriers (1828 L Street, NW, Suite 704, Washington, DC 20036), and used by permission.

Sandy enjoys bowling and went one night after work with a few women from her office. Afterwards, a bowler told Sandy that she would be better off joining the bowling league sponsored by the local Association for Retarded Citizens, because all her "friends" would be there. Sandy was very hurt. She just wanted to bowl and meet new people. The bowler's remark made her feel different, like she didn't belong.

Identify the myth in this scene. _____

_____

What would you do if you were this person's advocate? _____

_____

Myth: Disabled people are happier with people like themselves.

Fact: For years disabled people were seen together because they attended separate schools and had separate accessible facilities. They naturally socialized with people they met in these settings. But disabled people now are becoming integrated into regular schools, jobs, and social situations. As a result, nondisabled people are and will be seeing and meeting disabled people as individuals, not just as members of a group.

The belief that people with mental retardation should be "with their own kind" created many of the problems we are now trying to remedy: institutionalization, segregated education, and lack of communication with people who are mentally retarded. Citizens with mental retardation are not better off in segregated settings. Everyone needs to be exposed to different people and ideas to develop into well-rounded, interesting individuals. Segregation only furthers stereotypes and points out differences among people.

NOTE. Adapted from "Counterpoint," 1978, and "Dignity," by the Regional Rehabilitation Research Institute on Attitudinal, Legal and Leisure Barriers (1828 L Street, NW, Suite 704, Washington, DC 20036), and used by permission.

David has been an occasional patron of The Coconut, a bar and discotheque, where he goes to socialize and meet potential dates. David, who uses a wheelchair, asks The Coconut's owner to build a ramp so that he can get in and out unassisted. The owner refuses, telling David that he should come to the bar with a friend or, if that's impossible, that any of The Coconut's management staff would be willing to help David inside.

Identify the myth in this scene. _____

_____

What would you do if you were this person's advocate? _____

_____

Myth: Businesses, libraries, schools, and churches have no obligation to build special accommodations for disabled people.

Fact: Architectural barriers are caused by attitudes. Many architects, engineers, and builders do not construct facilities with the wheelchair user in mind because they have not had much contact with people in wheelchairs. It's a vicious cycle; wheelchair users aren't seen many places in public because they can't get in; therefore, nondisabled people don't often think about the barriers they are creating. Wheelchair users have equal rights to access. These rights are now law.

The Coconut owner's offer to help may seem very reasonable and generous. The owner's logic is that the management staff is already paid to accommodate the customers and a ramp is expensive. But being constantly aided depicts David as helpless and sets him apart from the other customers, immediately upon his entrance to the bar. David has finally overcome his own fear of appearing alone in public, only to find that wherever he goes he must submit to being treated differently. The cost of a ramp is small in comparison to David's loss of self-esteem and in terms of the extra business generated by The Coconut's accessibility. A facility which is accessible to disabled persons is more usable by *all* persons.

NOTE. Adapted from "The Invisible Battle: Attitudes Toward Disability," and "Free Wheeling," by the Regional Rehabilitation Research Institute on Attitudinal, Legal and Leisure Barriers (1828 L Street, NW, Suite 704, Washington, DC 20036), and used by permission.

Karl is an autistic 1-year-old boy. Karl's mother and father have tried to work with Karl on their own for 12 months, but they have become frustrated and exhausted. Karl is hyperactive as well as withdrawn and is often awake through the night. The doctor is urging the parents to place Karl at the state school, arguing that the school will have a trained staff to help Karl and other children like Karl for him to be with. Karl's parents are almost convinced.

Identify the myth in this scene. _____

_____

What would you do if you were Karl's advocate? _____

_____

Myth: Autistic people are better off in institutions.

Fact: Autistic people need individual attention 24 hours per day. Custodial care results in further withdrawal, and autistic people do not generally make progress in institutions.

There is a human tendency to run away from or to hide difficult problems. Having an autistic child can be very demanding and frustrating, and the support services are fragmented. Thus, the pressure to institutionalize is great. But a more positive approach is to increase the availability of support services, such as special education, vocational programs, and respite care. This approach gives autistic people their best chance to develop. Karl's parents have shown their willingness for 12 months to work with Karl. With some support and relief from the constant demands, they can probably continue to keep Karl at home quite successfully.

Session Two, Part Three

Facts about Developmental Disabilities

Purpose	To present facts about developmental disabilities
Method	Trainer's presentation and group discussion
Materials	Fact sheets about developmental disabilities: Handout #2e, "Definition of Developmental Disabilities" Handout #2f, "Facts about Autism" Handout #2g, "Facts about Cerebral Palsy" Handout #2h, "Facts about Epilepsy" Handout #2i, "Facts about Mental Retardation"

Trainer's presentation and group discussion

Developmental disabilities

20 minutes

Distribute the fact sheets about developmental disabilities.

Begin by going over the definition of "developmental disability" in the law. Read aloud the key points, ask for questions from the group, and give further explanation where necessary.

Continue the presentation using the fact sheets on the specific disabilities. Concentrate on those disabilities which advocates are most likely to encounter.

An alternative method is to ask group members to read each fact sheet silently. Ask them some simple questions about the facts presented; for example, on mental retardation, ask what percent of the population is retarded. This involvement should stimulate them to ask their own questions about the information.

Encourage the group to read the fact sheets thoroughly at home.

Conclude by noting that one of the best ways to break down attitudinal barriers is to get the right information.

insert after page 86

IMPORTANT NOTE TO TRAINERS

Definition of "Developmental Disabilities"

In Session Two, Part Three, of this curriculum, "Facts About Developmental Disabilities," fact sheets are included on four conditions that frequently result in developmental disabilities (mental retardation, autism, cerebral palsy, and epilepsy) along with the functional definition of "developmental disability" from Public Law 95-602. The fact sheets are included because the ability to advocate effectively is enhanced when a volunteer knows the facts about the condition affecting the person for whom he or she advocates.

To avoid reinforcing the old categorical definition of "developmental disability" or implying that a person is developmentally disabled by virtue of having one of these conditions, trainers are advised to refer to conditions other than the four included here that may also result in developmental disabilities. Other conditions which could result in developmental disability include:

Severe physical impairments associated with such disorders as brain and spinal cord injuries, cystic fibrosis, muscular dystrophy, osteogenesis imperfecta, spina bifida, Tourette Syndrome, tuberous sclerosis

Severe emotional disturbances, particularly childhood psychosis and childhood schizophrenia

Sensory impairments, such as vision and hearing impairments

Severe learning disabilities

Trainers are further advised to discuss the specific conditions in light of the five criteria for developmental disability set forth in the law. In order for a person with any disabling condition to be considered developmentally disabled, the condition must be severe and chronic, must be manifested before the person attains age twenty-two, must be likely to continue indefinitely, must result in substantial functional limitations in three or more of the areas of major life activity specified in PL 95-602, and must require lifelong or extended individually-planned and coordinated services.

Trainers should supplement the four fact sheets included in this manual with facts on other specific conditions. Information is available from consumer organizations, libraries, and state health departments.

Definition of Developmental Disabilities

As defined by Public Law 95-602, the 1978 Developmental Disabilities Assistance and Bill of Rights Act, the term "developmental disability" means "a severe, chronic disability of a person which

a. is attributable to a mental or physical impairment or combination of mental and physical impairments;

b. is manifested before the person attains age twenty-two;

c. is likely to continue indefinitely;

d. results in substantial functional limitations in three or more of the following areas of major life activity:

   i. self-care (which includes daily activities which satisfy personal needs for food, hygiene, safety, and appearance such as eating, washing, bathing, dressing, toileting)

   ii. learning (which includes changes in an individual's behavior or perception; the process of which results in such changes including understanding of perceived information, reasoning, use of abstract thought, academic and other educational skills)

   iii. receptive and expressive language (including the ability to understand language of others and the ability to communicate ideas through language—may be spoken, written, sign language or other gesturing)

   iv. mobility (which is the ability of the individual to negotiate distance using his or her own power or a personally-controlled device)

   v. self-direction (which is the ability of the individual to manage his or her personal and social behavior)

   vi. capacity for independent living (which means that financial resources are available to meet both basic life support needs and recreational needs of the individual either through income or support)

   vii. capacity for independent living (which is the ability to maintain a full and varied life in the community with little or no regular outside intervention in the living situation—including money management, leisure time activities, budgeting and purchasing)

e. reflects the person's need for a combination and sequence of special, interdisciplinary or generic care, treatment or other services which are of lifelong or extended duration and individually-planned and coordinated."*

Specific developmental disabilities often occur in conjunction with one another. For example, many people who are mentally retarded or who have cerebral palsy also have epilepsy.

Developmentally disabled people have the same legal rights—such as the right to vote, to marry, to a free education, and to due process under the law—as any person does, unless a court restricts a particular individual's rights. Law and general opinion favor "normalizing" the lives of developmentally disabled persons, or drawing them into the community rather than restricting their living, school, social, and work environments and opportunities. The emphasis in services is to help each individual, no matter how severely handicapped, grow and develop as much as possible. In short, services emphasize a person's *abilities* rather than disabilities.

*NOTE. Material which appears in parentheses is not included in the body of the law but is added to help define the major life activities. Adapted from "Defining the Developmentally Disabled Population," 1979, by the EMC Institute (24 Maplewood Mall, Philadelphia, PA 19144), and used by permission.

Facts About Autism

Autism is a lifelong severe disorder of communication and behavior which appears during the first 3 years of life. The cognitive and/or perceptual functioning of autistic persons appears to be greatly impaired, resulting in limited ability to communicate, understand, learn, and participate in social relationships. It occurs in approximately five out of every 10,000 births and is four times more common in boys than girls. It has been found throughout the world in families of all racial, ethnic, and social backgrounds.

How is it caused and what are the symptoms?

Research has not determined any one cause for autism, but the most promising research points to biochemical and neurophysiological causes. No known factors in the psychological environment of a child have been shown to cause autism. Its symptoms include:

1. Disturbance in normal rates of appearance of physical, social, and language skills. For example, a child long on one development plateau will suddenly in 2 months grow 8 months in development.
2. Abnormal responses to sensations, affecting sight, hearing, touch, pain, balance, smell, taste, and/or the way the person holds his or her body. For example, autistic persons may hear but not understand the significance of a truck coming up behind them. Some are apparently insensitive to pain.
3. Delayed, absent, or abnormal speech and language. More than half of autistic children never gain useful speech. Immature rhythms of speech, limited understanding of ideas, use of words without attaching the normal meanings to them, reversing the pronouns "I" and "you," and echoing are common.
4. Abnormal ways of relating to people and things. Behaviors include lack of attachment (for example, physically stiffening and rejecting cuddling), and a failure to use eye-to-eye contact. Autistic people may resist changes in routine or environment, develop inappropriate attachments to objects, play ritualistically, and spin objects.

Autism occurs by itself or in association with other disorders which affect the function of the brain such as viral infections, metabolic disturbances, mental retardation, and epilepsy.

Autistic people live a normal life span. On IQ testing, approximately 60% have scores below 50, 20% between 50 and 70, and only 20% greater than 70. Most show wide variations of performance on different tests. For example, one may be able to assemble a jigsaw puzzle quickly but be unable to identify a tree.

How is it treated?

Developmentally based special education programs using behavior modification and designed for specific individuals are most helpful in treating some of the symptoms and getting rid of some of the negative aspects of behavior. Counseling, training, and support for families help them to cope with the disability and to manage the autistic person's behavior. Medication may decrease specific symptoms.

What are the implications for advocacy?

A great many autistic citizens have been systematically excluded from timely and appropriate services. One result is a lifetime institutionalization rate of 80% to 90%, approximately half of which is due to the lack of residential alternatives and community support systems.

The following factors have contributed to inadequate service delivery:

1. Lack of public awareness of autism
2. Lack of professional awareness of autism, its behavioral and diagnostic characteristics, treatment, management, and potential for amelioration
3. Lack of referral mechanisms, interagency linkages, and follow-along
4. Lack of case manager and advocacy services to provide comprehensive program planning and family support services
5. Failure of service delivery systems to screen and identify autistic individuals as a special population with unique service needs

NOTE. Adapted from "Early Infantile Autism," 1977, by the Texas Society for Autistic Citizens (314 West 11th, Suite 207, Austin, TX 78701), and used by permission, and from *The World of the Developmentally Disabled Child: A Parents' Handbook, 1979*, by Marijean Suelzle and Vincent Keenan (Department of Sociology and Center for Urban Affairs, Northwestern University, Evanston, IL 60201), and used by permission.

Autistic individuals do not, as a rule, make progress in institutions. The characteristics of a handicap require individual attention in a natural, nonrestrictive environment on a 24 hour a day basis. Custodial care most often results in progressive and permanent withdrawal.

Effective special education and vocational training for the autistic child can substantially lower the institutionalization rate provided other community support systems are in place.

Facts About Cerebral Palsy

Cerebral palsy is a disability resulting from damage to those parts of the brain which control and coordinate muscles. This brain damage occurs before or during birth or in the first few years of life. About 700,000 people in the United States have cerebral palsy. It is neither hereditary nor contagious.

What are the symptoms?

In some persons with cerebral palsy, the symptoms may be so slight that they are unnoticed. Only precise movements, such as writing and talking, are impaired. In more severe cases, large muscle movements are impaired, making walking and speech difficult.

Specific characteristics, which may occur alone or in combination, are:

1. Spasticity—tense, contracted muscles
2. Athetosis—involuntary exaggerated movements of the arms, legs, and head
3. Ataxia—poor sense of balance and depth perception

The motor difficulty may involve all extremities, just one, those on one side of the body, or the legs only. Cerebral palsy may occur with other handicaps, such as seizures; vision, hearing, or speech disorders; emotional or behavior problems; or retardation.

What are the causes?

Lack of oxygen to the developing brain is the main cause of damage. Other causes may be infections or disease, physical injury, premature birth, or blood type incompatibility between parents.

How is it treated?

There is no cure for cerebral palsy, but much can be done to help people with it become self-reliant. Physical, occupational, speech, and hearing therapy improve mobility and communication skills. Orthopedic and neurologic surgery help improve muscle coordination in some cases. Braces reinforce a muscle group in certain types of cerebral palsy and prevent or correct deformity. Drugs may be effective in reducing tension and in limiting other problems connected with nerve damage. Counseling helps those with cerebral palsy deal with emotional, social, and practical problems related to their physical handicaps.

What type of help is available?

Services are being established in many communities to meet the lifelong needs of those with cerebral palsy, including programs of detection, treatment, care, and special education. In addition, teenagers and adults may receive job training and guidance and sheltered workshop experience leading to competitive employment. Recreation is provided through camps and hobby groups. Parents are helped through counseling and instruction. Day-care and developmental centers relieve them of the constant care required by the severely handicapped child.

What are the implications for advocacy?

People with cerebral palsy may need help from advocates in identifying and getting access to available services. When they are the victims of discrimination or misunderstanding, they may need an advocate's intervention. Advocates can provide supportive, long-term relationships when there is a need. Self-advocacy is a realistic possibility for people with cerebral palsy, and it should be encouraged.

NOTE. Adapted from "What Is Cerebral Palsy?" 1980, by United Cerebral Palsy Associations, Inc. (66 East 34th Street, New York, NY 10016), and used by permission, and from *The World of the Developmentally Disabled Child: A Parents' Handbook, 1979*, by Marijean Suelzle and Vincent Keenan (Department of Sociology and Center for Urban Affairs, Northwestern University, Evanston, IL 60201), and used by permission.

Facts About Epilepsy

The word "epilepsy" comes from the Greek word for seizures, and seizures are the primary symptom of all forms of epilepsy. Seizures are characterized by convulsions of the body's muscles, partial or total loss of consciousness, mental confusion, or disturbances of bodily functions which are usually controlled automatically by the brain and nervous system.

Epilepsy occurs in 1% of the general population. People with epilepsy have the same range of intelligence as other people. Epilepsy occurs with equal frequency in all countries and all races; males and females are affected equally. Seizures occur more frequently in children than adults; in approximately 80% of the cases, the first seizure occurs within the first decade of life.

What types of seizures are there?

The types of seizures include generalized tonic clonic (convulsions), generalized absence, simple and complex partial seizures.

Generalized tonic clonic seizures last possibly a few minutes or more and can occur one or more times daily, weekly, monthly, or annually. The victim loses consciousness and usually falls to the ground with general convulsive movements of most or all of the body. Afterward the person is generally confused or drowsy and may sleep for several hours.

Generalized absence seizures usually last from 5-20 seconds and may occur many times an hour. They may be accompanied by staring or twitching of the eyelids and momentary lapse of consciousness. The person is seldom aware that there has been a seizure. Generalized absence is most common in children.

Simple partial seizures may take place without impairment of consciousness and are limited to one part of the brain. They may cause involuntary movements of the limbs or strange sensations (smells, feelings) which are experienced by the patient but are not visible to the observer.

NOTE. Adapted from "Answers to the Most Frequent Questions People Ask About Epilepsy," 1977, by the Epilepsy Foundation of America (1828 L Street, NW, Washington, DC 20036), and used by permission.

The manifestations of complex partial seizures are the most complex, including chewing and lipsmacking, staring, confusion, abodminal pains and headaches, changes in color perception, spots before the eyes, buzzing and ringing in the ears, dizziness, fear, rage, anger, and following the seizure, sleep. The seizure may last from a minute to several hours. After the attack, the patient is unable to remember what happened. Complex partial can occur at any age.

What causes epilepsy?

No one knows for sure why brain cells discharge abnormally and cause the symptoms of epilepsy called seizures. However, scientists generally agree that epilepsy can result from defects in the brain, brain injury before, during or after birth, head wounds, chemical imbalance, poor nutrition, childhood fevers, some infectious diseases, brain tumors, and some poisons. Sometimes the cause cannot be found. It is not contagious, but anyone at any time can experience injury or disease that can lead to epilepsy.

How is it treated?

The treatment for seizures is primarily with medicines called anticonvulsants. Certain anticonvulsants are more effective in controlling specific seizure types, and in many instances a combination of medicines is more effective than one. Medications must be monitored closely for their possible side effects.

What can be done to help a person who is having a seizure?

Keep calm. There is nothing anyone can do to stop a seizure once it has begun.

If it is a generalized tonic clonic seizure, do not try to restrain the person. Clear the area of objects that might harm the person. Try not to interefere with the person's movements in any way. Do not force anything between the teeth. Do not put anything in the mouth. Turn the person on his or her side and place something soft and flat, like a coat, under the head. Generally it is not necessary to call a doctor unless the attack is followed almost immediately by another major seizure or if the seizure lasts for more than about ten minutes. After the seizure let the person rest if he or she wants to.

What are the prospects for a person with epilepsy living a normal and productive life?

Up to 50% of people with epilepsy can achieve complete control of seizures through medication, and 30% more can achieve partial control. People with epilepsy have fewer seizures if they lead active, productive lives. Most of them can work, participate in sports, go to school, drive a car, marry, and have children. More difficult to control than seizures are the fear and ignorance of society and the feelings of frustration and inadequacy that some persons with epilepsy have. Too often, the result is that they are excluded—or exclude themselves — from normal human relationships, educational opportunities, and employment.

How can advocates help?

Misinformation about epilepsy can lead to discrimination in employment, insurance, licensing, and so forth. Advocates can intervene in such cases. They can also identify services and refer people with epilepsy to the appropriate ones. People with epilepsy sometimes need emotional and practical support to build their self-esteem and their ability to act as their own advocates.

Facts About Mental Retardation

Mental retardation refers to significantly below average general intellectual functioning combined with impaired adaptive behavior. A mentally retarded person scores at 70 or below on an IQ test, matures and learns more slowly than normal persons, and has some difficulty learning adaptive behavior such as social, vocational, and everyday living skills. Mental retardation occurs before age 22, a criterion which distinguishes it from disabling conditions of later life.

About 3% of the population, or more than 6 million children and adults, are mentally retarded. One in ten Americans has a mentally retarded person in his or her family. More than 100,000 children are born mentally retarded every year.

What causes mental retardation?

The major causes of mental retardation include:

1. Genetic conditions carried by one or both parents which can be inherited
2. Non-inherited genetic conditions such as Down's Syndrome
3. Problems which can occur during pregnancy such as German measles, toxicity, malnutrition, RH incompatability, radiation, prematurity, birth injury
4. Problems which arise after birth due to physical accident, fever, malnutrition, lead poisoning, and environmental defects such as poor maternal care, sensory deprivation, and educational deprivation

According to the President's Committee on Mental Retardation, 75% of all mental retardation is thought to be related to poverty.

What are the levels of retardation?

The levels of mental retardation are:

Mild: Mildly retarded persons may be hard to identify, often being physically indistinguishable from the average population. In school, they are able to learn academic skills up to approximately sixth grade level, and, as adults, they can usually acquire the vocational and social skills necessary for independent living. Of all mentally retarded individuals, 89% are mildly retarded.

Moderate: Achievement in academic subjects is significantly impaired, but moderately retarded persons can learn self-care, social, and vocational skills. Their language is functional and they can achieve at least partial independence.

Severe and profound: Persons on these levels are capable, with special training, of a significant degree of self-care and may do useful work in sheltered employment but will probably require supervision throughout life. Language ability may be limited, but the person understands more than he or she can express. Only 5% of all retarded persons are severely or profoundly retarded.

Is mental retardation the same thing as mental illness?

Although a disease may be a cause, mental retardation itself is a condition and not an illness. Mental retardation occurs when normal development fails to take place, while mental illness is a disorder of thinking and emotions. Because of the many frustrations experienced by mentally retarded individuals it is common to find emotional problems in people with mental retardation, but the two are not the same.

How can advocacy help mentally retarded persons?

Attitudinal barriers have prevented mentally retarded persons from achieving full citizenship and normal lives. They may need advocacy to help get appropriate education, work, and social opportunities and services. They may also need ongoing assistance with practical, everyday matters, such as money management.

Many services are available, and advocates can help mentally retarded people find the appropriate ones. Services include community based residential facilities, financial assistance, health care, education, and vocational training.

NOTE. Adapted from "The Truth about Mental Retardation," 1979, by the Association for Retarded Citizens (2709 Avenue E East, PO Box 6109, Arlington, TX 76011), and used by permission.

Session Two, Part Four

The Advocate's Responsibilities and Resources

Purposes	To explain the responsibilities of advocates To identify resources to the advocate in the community and within the advocacy program To complete the "Advocate Interest Checklist"
Method	Trainer's and coordinator's presentation and handouts
Materials	Transparency: "Advocates Can Help . . ." Overhead projector and screen *Or:* large pad and easel Handout #2j, "Advocate Responsibilities and Resources" Handout #2k, "Guidelines for Citizen Advocates" Handout #2l, "Periodic Advocate Report" Handout #2m, "Advocate Interest Checklist" Pencils
Transparency *"Advocates Can Help . . ."* 5 minutes	Summarize the session so far by noting that the group has talked about the attitudinal barriers that developmentally disabled people confront and the distances between society and people with handicaps. The group has also learned about the principle of normalization that establishes some goals for developmentally disabled people, for society, and for advocates. Place the transparency, "Advocates Can Help . . .," on the overhead (or, use the sheet on which you have printed this information). Explain that advocates can often do much to bring about normalization and to make the difference between isolation and integration, exclusion and acceptance. Leave the transparency visible while the group completes the session.
Coordinator's presentation and handouts 30 minutes	For the remainder of the session, the group will look more closely at some of the specific responsibilities of advocates and at some of the available resources. If the trainer and advocacy program coordinator are different people, the trainer may ask the coordinator to conduct the rest of the session. Distribute the handouts you will be using in the remainder of the session.

"Advocate Responsibilities and Resources" #2j

Briefly review each of the questions and responses on this handout. Ask if group members have questions. Remind the group that advocacy requires mature, responsible people. It also often requires more resources than an advocate can provide alone. These resources are readily available through the advocacy program and in the community.

Community resources

If there is a guide to resources in your community (recreational, medical, educational, vocational, financial, and so forth), share it with the group. Or, if you keep an office file of resource organizations and contact people, let the group know about it.

"Guidelines for Citizen Advocates" #2k

Following these guidelines will help advocates establish good relationships with their proteges.

"Periodic Advocate Report" #2l

The reason for showing this report form to the group is to establish the important responsibility of keeping records. The terminology and information requested are appropriate for citizen advocacy, but a similar form can be adapted for other volunteer advocacy programs. Tell the group how often you expect advocates to report and in what form.

"Advocate Interest Checklist" #2m

Explain how the information on this checklist will help in matching or role assignment. (Part C is for citizen advocacy programs only.) Review the procedure for matching. Give the group directions and time for completing the form. If some prefer not to complete it or indicate that they don't want to be advocates, thank them for their interest and for participating in training.

The training session is complete when the group members turn in their forms. Let them know when and how you will next be in touch with them—for matching, another training session, or other activity.

Advocates Can Help . . .

by giving developmentally disabled people "normal" human relationships

by sharing activities that are a part of community living, like having a birthday party or taking a walk in the park

by helping disabled people learn useful skills, like interviewing for a job

by seeing that a developmentally disabled person receives all the services that he or she needs

by investigating grievances, following up on complaints, and representing a person whose rights have been violated

by informing developmentally disabled people of their rights and giving them the information they need to make appropriate decisions and take action

by letting other people see by example that being with a disabled person can be delightful instead of scary or uncomfortable

by accepting disabled people, thereby helping them accept themselves and feel that they are a part of society

Advocate Responsibilities and Resources

What should an advocate know about the protege or client before the initial contact?

You should know basic information such as how to contact him or her by phone or where to arrange a meeting, the nature of the disability, the nature of the need for advocacy, special needs such as medication and adaptive equipment, and whether there are overt behavioral problems with which you will have to deal.

What kind of information is confidential?

Advocates should treat all personal information received from the coordinator or professionals working directly with their proteges or clients as strictly confidential. Advocates should also respect the privacy of the disabled person and not repeat things he or she tells in confidence.

However, information an advocate receives from the protege or client is not privileged in the sense that an attorney's, priest's, or doctor's information is partly or wholly protected. If the protege or client should confide his or her involvement in a criminal act, the advocate should seek advice through the advocacy office.

What kind of financial obligations does an advocate have?

The citizen advocate is only responsible financially in the relationship for paying his or her own portion of the expenses incurred in any activity. The protege should pay his or her own way whenever possible. The advocate may want to treat the protege to dinner or to an activity such as bowling on special occasions. Each relationship will differ somewhat in these arrangements, and you will have to use your own judgment.

Volunteers who have short-term advocacy relationships should incur no expenses.

NOTE. Parts adapted from *Citizen Advocacy Coordinator's Handbook*, 1975-77, by the Massachusetts Association for Retarded Citizens (217 South Street, Waltham, MA 02154), and used by permission.

What kind of legal obligations does an advocate have?

In most cases advocates do not have any direct legal liability, unless their relationships are formalized legal ones, such as guardianships or conservatorships.

Advocates assume some legal obligations by voluntarily undertaking to temporarily supervise others. Your obligations are similar to those of coach of a Little League team or a youth activity leader. Essentially, you are expected to exercise reasonable care and consider safety in your activities, to keep your protege or client from harm during the times you are together, and to operate your car safely and keep your home free of hazards.

The best way to protect yourself from personal legal liability is to carry proper automobile and homeowner's or tenant's liability insurance.

Common sense will guide you in most cases. If there is any question about legal matters, the advocacy office has access to expert legal advice. Call the office if you have any questions.

What must an advocate do if it is necessary to end the relationship?

Like other relationships, your advocacy relationship may at some time have to be terminated. You or your protege or client may move away or your work or family situation may change. Other less tangible factors may make continuing the advocacy relationship difficult or impossible.

If you must discontinue your service as an advocate for any reason, please notify the program coordinator as far ahead of time as possible so that a smooth transition can be arranged. The transition might include one or more meetings in which the coordinator could help explain the reasons for ending the match and introduce a new advocate. Never terminate a relationship by sending a card or letter, by quitting your visits and calls without an explanation, or by any other abrupt or impersonal approach. The change may make the developmentally disabled person feel responsible, guilty, and rejected.

Where should an advocate go for help?

Always contact your program coordinator when you need advice. If the coordinator doesn't have the information you need, he or she will know where to find it.

How much contact do advocates have with program staff?

At the beginning of your match or assignment, you will probably be in touch with program staff after every meeting with your protege or client. After your match is better established, you will be able to get as much support from staff as your particular situation requires. The number and frequency of contacts varies with types of matches. Periodically you will submit a written or oral report to the staff about the goals and activities of your match.

What happens if an advocate disagrees with the program staff?

An advocate is a volunteer to a disabled person, not to a program. If there is a conflict between the interest of the program and the interest of your protege or client, your loyalty should be to the disabled person. It is reasonable to have a discussion with the program coordinator so that you can explain your different points of view and reach for some understanding, but you should never compromise your protege or client's interests for the sake of another person or organization.

What is conflict of interest?

"Conflict of interest" refers to a difference in the best interests of a developmentally disabled person and the best interests of another person or agency with power to affect the life of the developmentally disabled person. Or "conflict of interest" may refer to opposing interests in one person.

For example, the parents of a mentally retarded teenage girl may want to have her sterilized. Their interest in preventing problems may conflict with her interest in eventually becoming a mother. Or, the paid staff person in an institution may feel that a resident needs physical therapy, but her supervisor opposes the idea. The staff person's interest in the resident's welfare conflicts with her interest in getting a good work evaluation from her supervisor.

What kind of backing does the advocate receive through the program?

The advocacy office provides training, guidance, and resources to help the advocate be effective. The office can identify services in the community, such as job training, transportation, and financial assistance. The office also knows and will assist advocates with procedures for seeking assistance, solving problems, making applications, and taking action in general so that advocates do not have to deal alone with situations in which they have little experience or training.

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Guidelines for Citizen Advocates

1. Consider the needs and interests of your protege as your own needs and interests.
2. Be willing to challenge authority when your protege's interests are being compromised.
3. Help your protege grow as independent as possible. Don't do things for the protege that he or she can do.
4. Know your protege. Find out what he or she likes to do and can or can't do. Talk to your protege's family, teachers, social worker, and others who have contact with him or her, and talk to your protege.
5. Set goals for your match with your protege (not *for* him or her). These goals may relate to one or all of the broad goals for citizen advocates: friendship, teaching, and representation. Give your protege as many choices as possible in determining what the goals will be and how to reach them.
6. Break your goals down into small objectives. For example, if the goal is to help your protege learn to tell time, one first objective may be to recognize and identify the numbers on a clock.
7. Praise your protege (and yourself) for attaining objectives and goals and encourage him or her to achieve even more. Nothing motivates better than success.
8. Be consistent with the protege's environment. In behavior management and skills training, support (as far as you can without compromising the protege's best interests) parents, school, and work environment.
9. Don't reinforce unacceptable behavior, poor sportsmanship, and selfishness. Call attention to the protege's abilities rather than disabilities.
10. Be a model for your protege. Demonstrate the behaviors and skills that the protege needs to achieve.
11. Be patient. Developing friendship and trust will be slow. Giving help and seeing progress will be even slower. Let the protege set the pace; start where the protege is and don't push.
12. Be a friend. Call your protege between visits. Send a funny card now and then.
13. At the end of each visit, try to plan something for next time with your protege. Set a date and stick to it. Don't overcommit and then have to cancel. Try to avoid disappointing your protege.
14. Say "no" without guilt. Agreeing to do more than you have time and energy to do will eventually build resentment. Let your protege know what your limits are, and stick with them.
15. You don't have to be a juggler, travel guide, or three-ring circus. Simple activities suffice. Things that are routine and mundane to you may be new and exciting for your protege: a ride in your car, a walk, a visit to your home, doing garden work, washing the car. Your protege may want to do the same thing over and over. That's okay.
16. Don't worry. Your protege won't break and doesn't need constant, special attention. Your protege is a person first and a developmentally disabled person second. He or she is much more like you than different from you. Relax and enjoy each other.
17. If you need help or advice, or if you want to share some good news about your match, call the advocacy office. Even little things are important to us.

NOTE. Parts adapted from *Citizen Advocate Manual*, by the Citizen's Advocacy Program, Midland, Texas.

Periodic Advocate Report

Since you are very important to the advocacy program, we need to keep in contact with each other on a monthly basis. We realize you are very busy and your time is valuable; however, would you please check your answers to the questions below and return this report by mail to the advocacy office as soon as possible? You are welcome to add any comments.

1. Your name _____

2. Your protege's name _____

3. How often did you contact your protege this month?

   _____ once a week
   _____ twice a week
   _____ more

4. Did you visit your protege in person?

   _____ once every two weeks
   _____ once a week
   _____ more

5. In what activities did you and your protege participate?

   _____ recreation *(specify)* _____
   _____ visiting places of interest
   _____ movies
   _____ shopping
   _____ trips
   _____ protege's home
   _____ church
   _____ other group or organizational meetings
   _____ other *(specify)* _____

6. You may find it helpful for you and your protege to set a goal to work toward each month based on your protege's needs. If so, please write your plan below.

   a. Goal for past month _____

   _____

   Activities to meet this goal _____

   _____ _____

   Successful?

   _____ yes
   _____ somewhat
   _____ no

NOTE. Adapted from "Monthly Activity Summary Report" by the Eastern Missouri Citizen Advocacy Office (4331 Lindell Boulevard, St. Louis, MO 63108), and used by permission.

b. Goal for next month _____

_____

Comments _____

_____

7. Can the advocacy staff help you? We want your ideas, problems, and comments. _____

_____

_____

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Advocate Interest Checklist

The following information will assist us in finding the best volunteer role for you. Completing all items is optional.

Part A. VOLUNTEER ROLES

A variety of roles is available to volunteers through the advocacy program. Please check which types of roles you prefer.

1. How would you like to help the advocacy program?

   _____ ongoing one-to-one match with a developmentally disabled person

   _____ short-term one-to-one match to help a person resolve a crisis or to help solve a particular problem

   _____ volunteer to assist with the administrative functions of the advocacy program

2. If you are interested in an ongoing one-to-one match with a developmentally disabled person, please indicate the nature of the relationship you desire.

   a. What focus do you want?

      _____ mostly on practical, material problems

      _____ mostly on friendship, communication, relationship, support, and love

      _____ both practical problems and friendship

   b. What type of role do you want?

      _____ formal (established by law, such as guardian, conservator, adoptive parent)

      _____ informal (created by the consent of the people involved in it)

      _____ either formal or informal

   c. What degree of commitment do you wish to make?

      _____ high — I am interested in making a substantial commitment of time, energy, and emotional involvement

      _____ moderate — I am interested in making a moderate commitment of time, energy, and emotional involvement

      _____ low — I prefer to make a limited commitment of time, energy, and emotional involvement

Part B. VOLUNTEER ACTIVITIES

Following is a list of activities volunteers could perform through the advocacy program. Check "yes" if you are interested in performing the activity, "no" if not, "don't know" if you need more information or have some reservations. Under "comments" note special skills or the reason for your reservations.

Advocacy Activities	Yes	No	Don't Know	Comments
assist with money management				
negotiate with schools on admission, placement, or program				
train a disabled person in self-help, transportation, money management, etc.				
serve as guardian or conservator				
be a friend, share a disabled person's leisure activities, provide emotional support				
participate in administrative hearings				
assist with SSI applications and appeals				
help a person find job training or employment				
monitor the quality of services a disabled person receives				
counsel in personal relations				
obtain community services				
obtain medical services				
assist with zoning and licensure hearings				
assist with applications for insurance, driver's license, etc.				
negotiate with institutions				
help with voter registration and securing social and political rights				
other				
Volunteer Administrative Roles				
train other advocates				
assist with fundraising				
conduct workshops for the public on advocacy				
assist with publicity				
serve on the advocacy advisory committee				
do clerical work				
recruit volunteers				
research legal rights, community services				
other				

Part C. PROTEGE CHARACTERISTICS

Please describe the protege you would most like to help by checking for each item how much a particular characteristic matters to you.

	Strongly Prefer	Acceptable	Not Acceptable	Don't Care
Age				
under 18				
18-30				
31-50				
51 or older				
Physical handicap				
no physical handicap				
severe physical handicap				
slight physical handicap				
Mental handicap				
severe mental handicap				
moderate mental handicap				
mild mental handicap				
Residence				
institution				
group home				
living with parents				
independent				
Sex				
male				
female				
Religion				
specify				
Race				
white				
black				
brown				
Relationship potential				
capable of reciprocating				
nonreciprocating				
Other preferences or limitations				

Session Two

Audiovisual Resources

1. **"First Encounters"**
   What happens when a disabled and a nondisabled person meet for the first time? That is the subject of this film, funded by the Rehabilitation Services Administration and based on two years of research into employer attitudes. The film incorporates results from attitude change and persuasive communication research on using media to change attitudes and behavior of the general public. The film, which is 24 minutes long, is funny, interesting, and enlightening.
   $25.00 rental, $305.00 purchase
   Rehabfilm, 20 West 40th Street, New York, NY 10018

2. **"Fitting In"**
   This 1975 film, produced for the Wisconsin Developmental Disability Council, focuses on a day in the lives of Charles, who has epilepsy, Barbara, who is mentally retarded, and Tom, who has cerebral palsy. The film, 27 minutes long, is designed to educate the public to the idea that disabled persons can lead fulfilling lives if society will give them a chance.
   Free rental
   Central Wisconsin Center for the Developmentally Disabled, Library Information Center, 317 Knutson Drive, Madison, WI 53704

3. **"Handicapism"**
   Douglas Biklen and Robert Bogdan have prepared this color slide show. It considers prejudice, stereotyping, and discrimination practiced against people with disabilities and exposes personal, social, and professional forms of dehumanization. There are 145 slides, a script, and a cassette tape.
   $55.00 purchase
   Human Policy Press, PO Box 127 University Station, Syracuse, NY 13210

4. **"An Overview of the Normalization Principle"**
   This 12-minute color slide presentation with script gives the history and definition of normalization and how it can be applied.
   Free loan
   Association for Retarded Citizens, PO Box 6109, Arlington, TX 76011

5. **"People First"**
   This 34-minute color film documents the private lives and political activities of the first self-advocacy group of disabled citizens. It would be useful in showing how able developmentally disabled people are when they are allowed to develop independence.
   $35.00 rental, $350.00 purchase
   James Stanfield Film Associates, PO Box 851, Pasadena, CA 91102

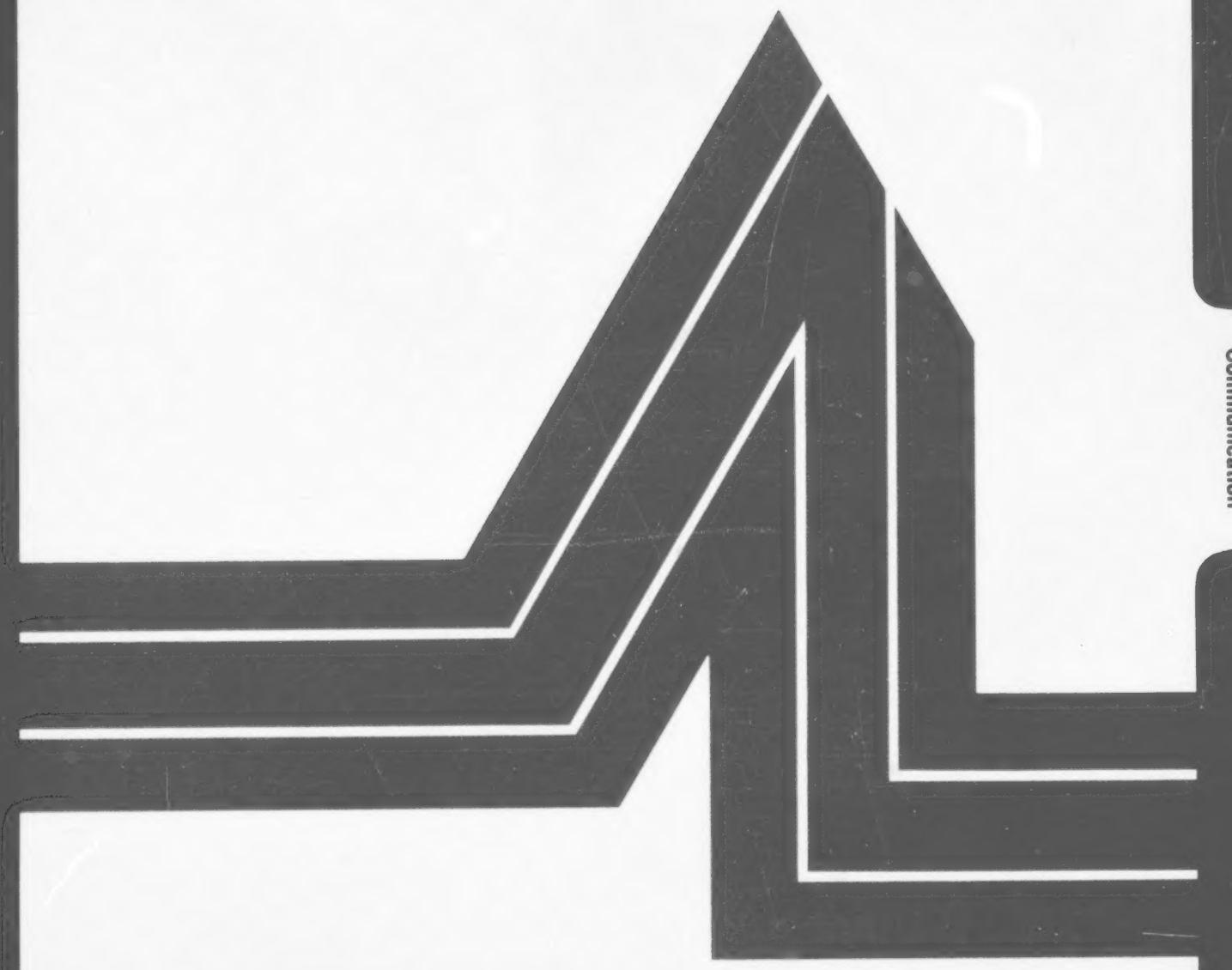
6. **"To Live As Equals"**
   This color film depicts several relationships between normal and retarded persons. It won first prize in the mental retardation division of the Second Annual International Rehabilitation Film Festival in 1978. It is 28 minutes long.
   $35.00 rental, $325.00 purchase
   Lodim Films, 52 Undercliff Terrace South, West Orange, NJ 97952

7. **"Who Are the DeBolts, and Where Did They Get 19 Kids?"**
   Director John Korty has created a warm, uplifting and joyous documentary about Robert and Dorothy DeBolt and their 19 children. The children include handicapped Korean War orphans, a blind boy who could not walk, and a girl without legs. The 54-minute film helps us see the human beings behind those who have handicaps. Public libraries or regional church council audiovisual centers may have copies to loan.
   $75.00 3-day rental, $395.00 videotape purchase, $695.00 16-mm film purchase
   Pyramid Films, PO Box 1048, Santa Monica, CA 90406

8. **"Would We Not Long for the Fair?"**
   This 15-minute color film shows what mentally retarded people are really like—living, working, going to school, and playing in a normal community setting.
   Free rental, $86.50 purchase
   Association for Retarded Citizens, PO Box 6109, Arlington, TX 76011

Session Three

Communication



Session Three
Communication

Purposes

To develop skills in communication that can be used in any advocacy situation

To develop skills in communicating with people who have communication handicaps

Rationale

Advocates need communication skills whether for dealing on a personal level with their proteges or clients or on a professional level when they are acting as spokespersons.

Topics, methods, and schedule

Part One: Identifying the Needs

- Warm-up activity (*optional*) (15 minutes)
- Group sharing: Communication problems (10 minutes)

Part Two: Two-Way Communication

- Paper-and-pencil exercise and discussion: Two-way communication (10 minutes)

Part Three: Effective Listening

- Role play: Tuning out (10 minutes)
- Small group exercise: Rogerian listening (15 minutes)
- Trainer's presentation and group practice: Listener responses (20 minutes)
- Small group exercise (*optional*): Tuning in (10 minutes)

Break

Part Four: Nonverbal Communication

- Illustrations (film or slide show, chart or transparency): Body language (20 minutes)
- Exercise with partners: Personal space (10 minutes)

Part Five: Communicating with Developmentally Disabled Persons

- Trainer's presentation and group discussion: Tips (15-30 minutes for each disability covered—mental retardation, hearing impairment, vision impairment, and physical handicap)

Part Six: Wrap-Up

- "I learned" statements (5 minutes)

Materials

Nametags, paper, and pencils for group members

Materials as needed for a warm-up activity

Diagrams 1 and 2: "Two-Way Communication"

"Tuning Out" role play situations

Transparencies: "Listener Responses"
"Body Language"

Slips of paper with one of the five listener responses on each (See Part Three)

Tape measure

Slide or film projector, overhead projector, screen, extension cord, and projection stand (as needed for exercises in Parts Three and Four and for simulation in Part Five)

Slide show or film (as needed for illustration and demonstration in Part Four)

Materials as needed for simulation of communitation handicaps in Part Five (such as blindfolds)

Handouts

#3a, "Effective Communication Strategies"

#3b, "Listener Responses"

#3c, "Nonverbal Communication"

#3d, "Communicating with a Mentally Retarded Person"

#3e, "Communicating with a Hearing Impaired Person"

#3f, "Communicating with a Visually Impaired Person"

#3g, "Communicating with a Physically Handicapped Person"

Preparations

Prepare nametags and any necessary materials for the warm-up activity.

Reproduce diagrams 1 and 2 on "Two-Way Communication."

Copy role play situations for the "Tuning Out" exercise for each pair of participants to have a set.

Print on slips of paper the five listener responses, one response per slip.

Make transparencies of: "Listener Responses"
"Body Language"

Select the communication handicaps (mental retardation, hearing impairment, vision impairment, physical handicap) that you will cover (it is not necessary to review the tips on all four disabilities if advocates will not encounter them). Copy the appropriate information sheets and tips.

Make copies of the other handouts for group members.

Gather any materials you will use to simulate handicaps.

Optional. Invite a speech pathologist or other communication specialist to present part of the session or to be a resource person. (This can be a good opportunity to involve in the advocacy program a staff person in an agency with which the volunteers deal. This involvement can facilitate cooperation from the agency.)

Session Three, Part One

Identifying the Needs

Purpose

To introduce participants to one another and to help them begin communicating with each other

Methods

Warm-up activity

Group sharing

Materials

See descriptions of warm-up activities in "Tips for Trainers" for needed materials.

Getting Acquainted

15 minutes

If the members of this training group do not know one another, take time to do one of the warm-up activities listed in "Tips for Trainers." In addition to introducing group members, this will get them involved in communication with one another.

Group sharing

Experiences

10 minutes

Begin the session by asking the group members to share some of their experiences when they wished they had more skills in communication. If group members have some experience as advocates, ask especially for their experiences with their clients or proteges and with the people they have interacted with on behalf of their clients or proteges. If the group members have not yet become active advocates, ask for their experiences with family, friends, co-workers, or professionals.

To get the group started, give an example of one of your own experiences when communication didn't work.

Some questions to ask the group are:

> Have you had any special communication problems related to your protege's (or client's) disability? What are they?
>
> Have you had any difficulties in communicating with others in the community about your role as an advocate? What do you have trouble explaining? Do others understand? Why or why not?
>
> Have you ever tried to change someone's mind about a service or need for your client or protege and felt that you just weren't getting anywhere? What do you think the communication problem was?

You may want to jot down brief notes about the problems and ideas the group members raise. As you conduct the rest of Session Three, relate the exercises to their comments and point out how the suggestions given on using various communication techniques can solve some of the particular problems they have raised. Ask the group members also to

think throughout the session about how the communication techniques they learn might help them with their needs.

Relating the suggestions on communication to their own situations will help make the training meaningful and useful. Its aim is to help the group solve problems and learn skills rather than to absorb abstract facts.

Session Three, Part Two

Two-Way Communication

Purpose	To illustrate the importance of two-way rather than one-way communication
Method	Paper-and-pencil exercise
Materials	Two sheets of paper and a pencil for each participant A reproduction of diagrams 1 and 2 for the demonstrator
Paper-and-pencil exercise and discussion*	Explain that the group will participate in an exercise in following directions. The first part of the exercise will require them to take directions from one member of the group when no two-way communication is permitted.
Two-way communication 10 minutes	Select one person to be the demonstrator and ask that person to study diagram 1. Then ask the demonstrator to turn his or her back to the group and give the group instructions on drawing the diagram. The demonstrator should begin with the top square and describe each in succession, noting in particular the relationship of each square to the previous one. No questions are allowed, and the instructions cannot be repeated. After the group has completed diagram 1, give the demonstrator diagram 2 and ask him or her to study it. Facing the group, the demonstrator gives instructions on drawing the diagram, again beginning with the top square and describing each in succession and in relationship to the others. Group members may ask questions, and the demonstrator may repeat instructions if necessary. Group members then compare their drawings of the two diagrams. Discuss with the group the advantages of two-way communication. Conclude with the idea that communication requires the participation of both parties. Both need to check their understanding by getting feedback.

*NOTE. Adapted from J.W. Pfeiffer and J.E. Jones (Eds.), *A Handbook of Structured Experiences for Human Relations Training*, Vol. I (Revised), 1974, pp. 13-18 and used by permission of University Associates Publishers, Inc., P.O. Box 26240, San Diego, CA 92126). The structured experience is adapted from H.J. Leavitt's *Managerial Psychology*, University of Chicago Press, 1958, pp. 118-128.

Diagram 1: One-Way Communication

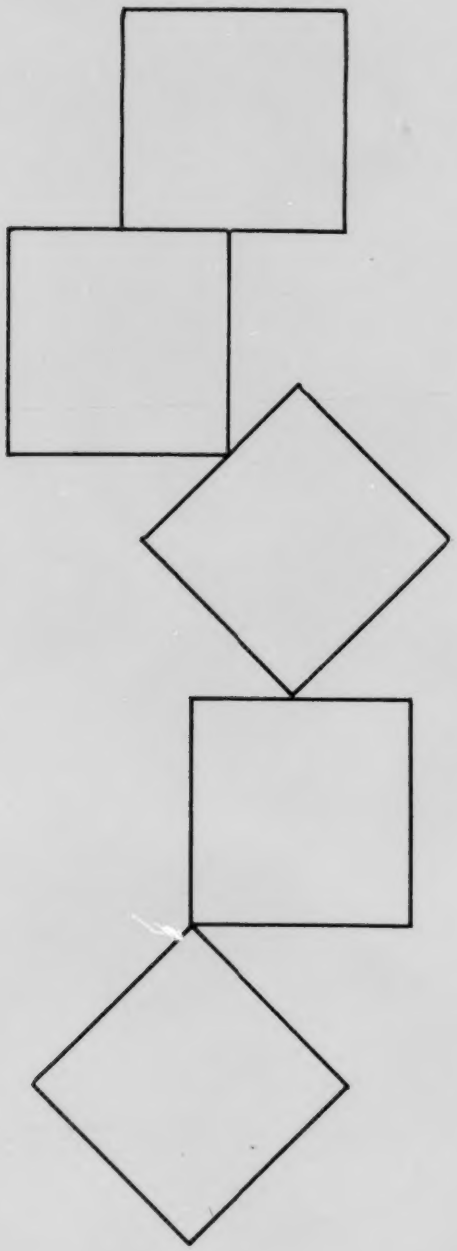


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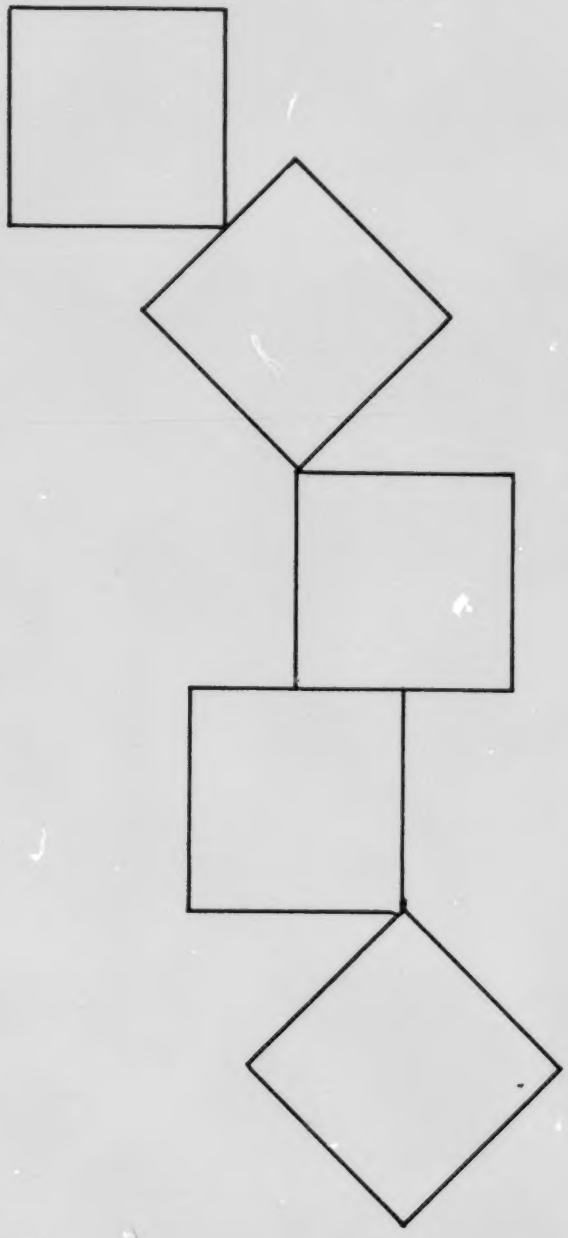
Diagram 2: Two-Way Communication



Session Three, Part Three

Effective Listening

Purpose	To give group members skills in listening and responding to a speaker
Methods	Role play Small group exercise Trainer's presentation and group practice
Materials	Role play situations for "Tuning Out" exercise Transparency or chart: "Listener Responses" Slips of paper with one of the five listener responses on each

Role play*

Tuning out

10 minutes

Introduce the topic by noting that listening is one essential ingredient of two-way communication, whether one is dealing with a client or protege on a personal level or discussing an appropriate program plan with a professional. But most of us don't listen well; after a conversation we remember only about half of what was said. This exercise is to identify what happens during a conversation when the parties are not listening.

Explain that the purpose of this exercise is NOT TO LISTEN to the other person but to concentrate on getting your point of view across as quickly as possible.

Break the group into pairs. Give one person in each pair the situation for the person who needs an air conditioner repaired. Give the other person the situation for the plumbing and heating employee.

Give the pairs about 2 minutes to study their roles and to decide what they are going to say.

Have all participants begin at the same time, and allow them to interact for 4-5 minutes before you stop them. Be sure that participants in each pair are NOT listening to one another.

As a group, identify some of the characteristics of not listening (for example, loud voices and averted eyes) and how the pairs felt when they were not listened to (angry, frustrated, helpless, desperate).

*NOTE. This exercise is adapted from *Training the Volunteer Co-Ordinator*, 1977, by John Anderson, Larry Moore, and Pat Ross (The Vancouver Volunteer Centre, 1625 West 8th Avenue, Vancouver, British Columbia, Canada) p. 125, and used by permission.

Small group exercise*

Rogerian listening

15 minutes

This listening exercise illustrates the difficulties of listening well and also provides one method of improving one's listening skills. The method of repeating a speaker's statement before offering one's own point of view was suggested by the psychologist, Carl Rogers, and is used in marriage counseling and negotiations.

The exercise can be done in groups of three or more participants. One person serves as monitor, the others as discussants. The monitor helps the discussants find a subject of mutual interest, but on which the discussants have different views or feelings. The subject should be a controversial one, such as drafting women, abortion, capital punishment, or corporal punishment in schools. The first discussant states his or her position on the issue and a discussion follows.

In this exercise, a speaker must summarize the essence of the previous speaker's statement before he or she speaks. The summary must satisfy the previous speaker that his or her statement has been understood. The monitor's role is to make sure that this process takes place.

Example

Judy	. . . and that's why I'm in favor of having separate schools and specially trained teachers for mentally handicapped students.
Dave	Okay. You're saying you favor separate schools and teachers because you think the students can get education that better meets their specific needs there and that they would just be shoved to the back of the regular classrooms and ignored. Is that right?
Judy	You got it.
Dave	Okay. But I think there are greater problems from segregating handicapped students. They would never learn how to interact with normal people if they are kept apart in school so . . .
Judy	But that's ridiculous. Why would . . .
Monitor	Hold it, Judy. First of all, Dave didn't finish his point. Second, you didn't restate it before responding.
Judy	Sorry.
Dave	Well, my point was, all people, mentally handicapped or not, need to know how to get along with normal people. So why should we separate them in schools and not give them the chance to learn how to get along?

*NOTE. This listening exercise is adapted from *Values Clarification: A Handbook of Practical Strategies for Teachers and Students,* by Sidney B. Simon, Leland W. Howe, & Howard Kirschenbaum, pp. 296-297, and reprinted by permission of A & W Publishers, Inc. (95 Madison Avenue, New York, NY 10016). Copyright © 1972; copyright © 1978.

Judy — Well, I'll tell you. Separation is the only way that . . .

Monitor — Hold it again, What did Dave say?

Judy — Oh, yeah, Dave's worried that the students will miss out. But I think . . .

Monitor — Wait a minute, Dave, are you satisfied that Judy understands your arguments?

Dave — No.

Monitor — Judy, do you want to try it again? Or do you want Dave to repeat his point?

This exercise can last as long as the groups seem interested and involved in their discussions, or until they reach an understanding of how poorly most of us listen. If there is time, the monitors may change roles with the discussants.

Follow up the exercise with a discussion in which group members can tell what this experience has shown about the difficulty of listening; or use "I learned" statements (see "Tips for Trainers"). In particular they may conclude that in a discussion, we are so concerned about what we are going to say next that we often tune out all or part of what is being said. A discussant may also react with prejudice and dislike to a person whose views and experience differ too much from his or her own.

Trainer's presentation and group practice

Up to this point, the exercises have illustrated the importance and difficulty of listening. The "Rogerian listening" exercise also suggested a workable way of improving one's listening (repeating a speaker's comments).

"Listener Responses" #3b

20 minutes

Listening, however, is not enough. The *response* a person gives a speaker affects whether the speaker continues talking and whether communication takes place.

Refer to the background material, "Listener Responses," to introduce the topic of responding.

Many of the responses a listener gives cut off conversation. Evaluating, advising, criticizing, directing, or moralizing may all cut off further talk by making a speaker defensive or resistant.

Place the transparency, "Listener Responses," on the overhead projector (or place the chart where all group members can see it).

Note that these are five positive ways that a listener can respond to a speaker. Knowing how to use them can make us better listeners. The responses help a listener focus attention on a speaker and encourage the speaker to communicate more.

Go over each of the responses, reading the examples.

For practice, read the statements below one at a time (or make up your own examples). Before you read each statement, give one person in the group a slip of paper on which you have written a type of listener response. That person is to respond to your statement with the type of response identified on the paper. Ask other group members to identify the type of response that the person gives.

Let as many people as possible have turns responding. If the group is larger than eight to ten people, you may break it up into smaller groups, with one of the trainees reading the statements.

Statement	*Listener Response*
1. I'd like to apply for that job at the grocery store, but I always choke at interviews.	echoing
2. I used to really enjoy that Chinese restaurant.	dialogue sustaining
3. We had a great time together taking a walk by the river. The wild flowers had just begun blooming, and we saw a family of ducks.	passive listening
4. No matter how hard I try I can't seem to get my protege to show any affection or caring.	active listening
5. All my friends have been wearing makeup for but my mother won't even let me wear lipstick.	paraphrasing

Answer any questions the group may have about the types of responses and when to use them. Note generally that all of the responses allow the speaker to continue talking. You might want to compare the result if the response to example #1 had been to give a solution ("You'll just have to be confident and relaxed in the interview"); or the response to example #3 had been to moralize ("You ought to spend more time with your protege"); or the response to example #5 had been to judge ("Your mother is right—you are too young").

Small group exercise *(optional)*

Listening

10 minutes

If group members seem to be enjoying practicing listener responses and are benefiting from it, and if you have time in your training session, continue with this listening exercise.

Break the participants again into groups of three—two discussants and one monitor. One of the discussants picks a problem that he or she wants to discuss. The discussant should be personally involved with the problem he or she selects, though it should not be so personal as to cause embarrassment or discomfort. Possibly the problem will relate to the speaker's protege or client. The second discussant will practice the five positive listener responses to check his or her understanding and to encourage the first speaker to find solutions to the problem independently. The

monitor wil observe mainly, but may interrupt when he or she notices an evaluating or advice-giving response. After a few minutes of the conversations, the small groups may discuss among themselves how the different listener responses made them feel.

Break

10 minutes

During the break, as an alternative to the personal distance exercise following, measure as unobtrusively as possible the distance between people in small groups and record the different figures. Note any explanations you can perceive for differences in the amount of space between different people. For example, a couple continuing the listening exercise above may be closer than two people who do not know each other, chatting casually at the coffee pot.

Hot Air: Person Who Needs the Air Conditioner Repaired

You have just moved into your new home and you were trying to unpack your household goods when you discovered that your air conditioner does not work. You have driven your car to the A-1 Plumbing and Heating Company to get some help. You do not know anyone else in town and you must have someone come and fix the air conditioner as the weather report states that it will be 104 degrees this afternoon. You do not know anything about air conditioners, but you are sure this is a simple problem that any repair person could solve. Your spouse has told you not to come back without help so you feel you must use any method to convince the person at the repair shop to help you. Remember that the object of this exercise is NOT TO LISTEN to the other person.

Blowing Steam: Plumbing and Heating Employee

You work for the A-1 Plumbing and Heating Company. Your job is very specialized and in fact you only know about fixing water heaters. You have been left in charge of the store for the day. You have already had two calls from people who have problems with their air conditioners.

You have decided that the next person who comes in with an air conditioning problem must be made to understand that you know nothing about such a problem and you will absolutely refuse to give them any advice about their problem. They must understand that you cannot help them in any way.

Remember the object of this exercise is NOT TO LISTEN to the other person.

Listener Reponses

Passive Listening

1. Nonverbal signals
   a. head nodding
   b. smiling
   c. leaning forward
2. Verbal signals
   a. "I see"
   b. "really"
   c. "yes"
   d. "mm-hmm"

Dialogue Sustaining

Respond with "I'd like to hear more about that" or say "and" or "but" using a questioning inflection to encourage the speaker to continue.

Speaker: I was planning to get a job . . .

Listener: but?

Speaker: But my mother doesn't have time to drive me to work.

Echoing

Restate what the speaker has said using the speaker's own words.

Speaker: I feel scared when I meet new people. Everyone stares at me.

Listener: You feel scared when you meet new people and they stare at you.

Active Listening

Describe the emotion the speaker seems to be experiencing. Lead-in phrases to use are: "You seem to really feel_____." "It sounds as if you feel _____ right now."

Speaker: Everybody tells me what to do. I wish I could do what I want.

Listener: I gather you are pretty irritated right now.

Paraphrasing

Restate what the speaker has said using your own words.

Speaker: No matter what I do my teacher puts me down. I guess I can't do anything right!

Listener: Am I getting this right? You feel that nothing you do pleases your teacher.

Effective Communication Strategies

Your effectiveness as an advocate depends largely on your ability to communicate, that is, to send and receive messages accurately. You must be able to communicate first of all with your protege or client. Since you are supposed to represent his or her interests as though they were your own, you need to be able to determine what those interests are. Some developmentally disabled people have communication handicaps, such as hearing or vision impairments or limited intelligence, and you may need special techniques to help them express themselves and to understand them. You also must be able to communicate with the people, such as teachers, service providers, and administrators, who have the power to make the necessary changes for your client or protege.

Good communication involves more than just talking. It depends on verbal and nonverbal factors, such as voice quality, pronunciation, vocabulary, grammar, gestures, facial expression, interpersonal skills, and attitudes. You can improve your communication skills by becoming aware of some of the techniques of effective communication.

Interpersonal skills

A good relationship between two people increases the chance for communication. You listen better if you care about the person who is speaking; also, you are inclined to be open and honest if a listener is responding with respect and understanding. When you let the other person know that you think he or she is a worthwhile person, you create trust. Thus, your attitudes about another person affect how well you communicate. Whether your relationship is personal or professional, communication is more likely to take place if you relate to the other person with empathy, respect, and authenticity.

Empathy

Empathy is recognizing another person's feelings. This is different from sympathy, which is compassion or condolence. Empathy, in effect, is saying, "I may not feel the same way, but I do recognize how you feel." *Being* empathetic is not enough; you must be able to convey your understanding. Here are some ways that you can communicate empathy.

Before you begin to understand how someone feels, you must give him or her your undivided attention. When your protege or client is telling you something, don't let personal problems or irrelevant thoughts distract you.

You can communicate your attentiveness and concern through your nonverbal behavior. Face the person directly, lean slightly forward, and look at the person's eyes.

Responses such as "Yes," "I see," or "mm-hmm" or nodding your head and smiling will encourage a person to continue talking. Silence may be interpreted as indifference or disapproval. Respond frequently and honestly. Don't say "I see" when you don't really understand. To check your understanding, paraphrase what the person has said and preface it with a question such as, "Do I have this right?"

Respect

Respect, the second crucial ingredient in a good relationship, is the unconditional acceptance of another person's behavior, beliefs, opinions, and feelings. This is a "no strings attached" attitude; your continued regard is not based on the person meeting your standards of behavior or beliefs. Acceptance is not the same as agreement. You can disagree with someone and still accept that person's right to his or her own opinions.

Being accepting is sometimes hard to do. Most of us have prejudices, whether we are aware of them or not. You don't have to condone a person's lifestyle, beliefs or behavior, but you should respect his or her right to choose how to think and act.

You can show respect by following the guidelines for communicating empathy. People will feel respected if you listen attentively and check your understanding by asking questions. Avoid arguing, trying to prove that only your ideas are right, and jumping to conclusions before you have enough information.

Showing respect also requires a nonjudgmental attitude. Criticisms such as "Why don't you act your age?" and "That's not the way you're supposed to behave" will usually only cause resentment. Your protege or client will feel accepted and understood if instead of

saying, "You shouldn't feel that way," you say, "I can see why you might be angry. Maybe we can think of some things you can do to help the situation."

You can convey respect verbally, but if you are not sincere, your nonverbal behavior can convey your disapproval, embarrassment, repulsion, or insincerity. Nervous fidgeting, blushing, frowning, avoiding eye contact, staring, or moving away from the person will make your true feelings obvious. Nonverbal behavior that shows acceptance and warmth includes smiling, touching, moving closer, eye contact, and relaxed body posture.

Acknowledging your protege's or client's strengths and abilities also shows respect. Your relationship should be a partnership with each of you contributing equally. Patronizing or dominating your protege undermines this relationship. Common forms of patronizing include insincere praise, excessive sympathy, giving unwanted advice, or insisting on doing things for a person that he or she is capable of doing. The dominant "I know what's best for you" attitude is communicated by frequent interruptions, arguments, lectures, and changes of the subject. If all of your communication is to provide solutions and advice and to impose your own ideas, you belittle your protege's ability to accept responsibility. Your respect motivates your protege or client to seek answers to his or her own problems.

Authenticity

Being authentic means being natural, open, and nondefensive. However, it does not mean that you reveal all of your thoughts and feelings all of the time; those you do choose to express must be genuine. Sharing positive feelings with your protege is almost always appropriate, but revealing feelings of anger, disgust, and frustration requires a high degree of trust in your relationship. When you feel it is necessary and appropriate to discuss your negative emotions, phrase them tactfully and in a way that does not blame or criticize your protege: "When you did this, I felt _____. Did you realize that was how I felt?"

Relating your personal experiences, when they are relevant to your protege's problem, is another way to communicate authentically. For example, when your protege is having trouble at work, you might respond, "I remember how uncomfortable I felt when my boss and I had a disagreement." Then go on to explain the incident. Share information about your experiences sparingly and only when relevant to your protege's needs, or it may seem that you are trying to impress your protege with your own accomplishments.

Discrepancies between your verbal and nonverbal behavior may reveal a lack of authenticity. If your conversation is all pleasant and positive, but you tap your fingers on the table, wear a forced smile, and fidget, people will perceive you as dishonest and insincere. Body language can be effective in conveying your genuine care and concern. A pat on the back, a hug, or shaking hands may be an appropriate way to express your feelings if physical contact does not make your protege uncomfortable.

TIPS

1. Pay attention to your protege or client or to anyone else with whom you are interacting.
2. Check your understanding of what a person is saying.
3. Accept the other person's right to his or her own feelings and beliefs.
4. Acknowledge your protege's or client's strengths.
5. Share positive feelings.
6. Be honest.

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Listener Responses

Immediately after the average person has heard someone speak, he or she remembers only about half of what was said. Instead of focusing our attention on the speaker, we allow our thoughts to wander, and sometimes they never return to the conversation. How many times have you missed a speaker's message because you were mentally planning a trip or making a shopping list instead of listening?

You can improve your listening habits by developing a few basic skills. One essential skill is the ability to block out distractions. You must be able to concentrate on the ideas being presented in spite of background noise, uncomfortable seating, or preoccupation with your own thoughts.

Good listening requires much more than passively letting sound waves enter your ears. You must be as actively involved as the speaker. While you listen, try to identify the speaker's main ideas and decide which are most important. Compare the speaker's attitudes and opinions with your own. Select the points which you feel are worth remembering and then try to relate them to your own experience.

The response you give to a speaker determines whether your communication continues. Some responses, even when the responder means well, cut off further communication. Such responses include evaluation ("You should . . .," "You are wrong . . ."), advice ("Why don't you . . ."), direction ("You have to . . ."), moralizing ("You ought to . . ."), criticism ("If you had only . . ."), analysis ("What you need is . . ."), and one-upmanship ("You think your problem is bad, you should hear about mine"). These evaluating and criticizing responses make people defensive and resistant to sharing more. The advising and directing responses cut off communication by "solving" and thereby ending the problem. They also prevent the speaker from working out his or her own problem through further talking.

There are basically five ways you can respond to a speaker if your goals are to understand and to encourage the speaker to continue.

1. **Passive listening**

   Passive listening simply lets the speaker know you are still "with" him or her. Several nonverbal signals will encourage the speaker to continue—nodding your head, smiling, and leaning forward. Typical verbal responses used to show you are paying attention include "I see," "really," "yes," and "mm-hmm."

2. **Paraphrasing**

   Paraphrasing is one way to check your understanding of the speaker's ideas. Restate what the speaker has said, using your own words. This is most appropriate when the speaker pauses and is waiting for you to comment. For example:

   Speaker: No matter what I do, my teacher puts me down. I guess I can't do anything right!

   Listener: Am I getting this right? You're beginning to feel like a failure because nothing you do seems to please your teacher.

3. **Echoing**

   When the speaker clearly describes an emotion, restate the idea using the speaker's own words.

   Speaker: I feel scared when I meet new people. Everyone stares at me.

   Listener: You feel scared when you meet people and they stare at you.

4. **Dialogue sustaining**

   If a speaker seems to need reassurance that you are interested, try a response such as, "I'd like to hear about that." When you need more information, dialogue sustaining responses such as, "I'd like to know more about that," and saying "and" or "but" with a questioning inflection may encourage the speaker to continue talking.

   Speaker: I *was* planning to get a job . . .

   Listener: But?

   Speaker: But my mother says she doesn't have time to take me to work and I can't drive.

5. **Active listening**

   Active listening is providing feedback on the emotion the speaker seems to be experiencing. Your feedback helps the

person to get in touch with his or her feelings and then to work out solutions independently. Your feedback should be on the same emotional level as the speaker's original statement. Some lead-in phrases you can use are: "You seem to feel really _____," "Kind of makes you feel _____," and "It sounds as if you feel sort of _____ right now."

Speaker: Everybody tells me what to do! I wish just once I could do what I want to.

Listener: I gather you're pretty irritated right now.

Active listening takes time (it would be quicker to evaluate the speaker's feelings and give advice). So don't use it unless you really want to help the person and are willing to take the time. Active listening also means accepting the speaker's feelings without moralizing or trying to change the person.

These responses show a speaker that you are listening. Consciously using these responses also helps you pay attention to the conversation.

TIPS

1. Block out distractions.
2. Think while you listen. Identify the speaker's most important points and relate them to your own ideas and experiences.
3. Suspend your judgment for a while and try to understand the speaker's point of view.
4. Resist evaluating, criticizing, giving solutions, or moralizing.
5. Use one of the five positive listener responses:

   passive listening
   paraphrasing
   echoing
   dialogue sustaining
   active listening

Session Three, Part Four

Nonverbal Communication

Purpose	To illustrate how people communicate nonverbally
Method	Group activities
Materials	Film or slide show, projector, screen Transparency: "Body Language" Tape measure
Illustrations (film or slide show; transparency or chart) and discussion *Nonverbal communication* 20 minutes	Introduce the idea that people communicate without words by referring to some of the things group members have said or observed during the listening exercises. For example, they may have noticed tense body posture in a person arguing or eye contact and relaxed body posture in a person practicing one of the listener responses. As we interact with others, we constantly send nonverbal messages through our body movements, facial expressions, and gestures. Show a segment of a slide show or film without using the sound track. Any film or slide show that portrays people interacting with one another will work. Ask the group to determine what is going on in the film or slide show and how the people involved feel about each other. When you stop the audiovisual presentation, ask the group members to identify visual cues that allowed them to interpret the relationship (such as facial expressions, gestures, and touching). Place the transparency, "Body Language," on the overhead projector (or place the chart where the group can see it). With the group, review the pictures one at a time to determine what each person's body language tells about him or her.
Exercise with partners* *Personal space* 10 minutes	The space people keep between themselves when conversing is one nonverbal way of communicating their relationship. People with an intimate relationship stand much closer to each other physically than, say, people with a teacher-student relationship. As people establish closeness verbally, they may move closer physically. But if someone gets closer physically than the relationship warrants, a person may become defensive and back off.

*NOTE. This exercise was adapted from *Training Volunteer Leaders*, 1974, by the Research and Development Division, National Council of Young Men's Christian Associations (291 Broadway, New York, NY 10007), p. 73, and used by permission.

Thus, standing either too close or too far from a person with whom you are conversing may affect communication negatively.

If, during the break, you have measured distances between people, explain now what you were doing and what the measurements reveal about "personal space." Let the group comment.

If you did not measure distances between people during break, use the following exercise to reveal how comfortable people feel at different distances from each other.

Each person selects a partner. Each pair stands about 15 feet apart. They begin a conversation. As the conversation proceeds, Partner A walks slowly up to Partner B (standing) until they make physical contact. Partner A then backs slowly away to the place where he or she feels comfortable. The distance between A and B is measured. Then the partners repeat the exercise, with Partner B walking forward and then backing away to the comfort spot. Almost always the partner's distance preferences vary.

There is a maximum and minimum distance for most people. Too close and we feel engulfed, too far and we feel rejected.

Before proceeding with tips on communicating with handicapped people, restate the idea that we never communicate with words alone but nonverbally as well.

Body Language

Nonverbal Communication

As we interact with others, we constantly send nonverbal messages through our body movements, facial expressions, and gestures. The ability to send these nonverbal signals is innate, but nonverbal communication is also a skill that can be improved through practice.

Personal space

One of the nonverbal ways we communicate our relationship to people is by the distance we keep between us. We each have an invisible personal territory surrounding us, called personal space. The boundaries of your personal space contract and expand depending on your emotions, the activity you are involved in, your cultural background, and whether the relationship is intimate, personal, social, or public. Most of your daily communication occurs in the personal and social zones. During conversation, people usually maintain a personal distance of two and a half to four feet. At social gatherings, the appropriate distance for conversation increases to four to seven feet.

People are very disturbed by intrusions into their personal space. If someone gets too close to you, you feel nervous and uncomfortable. You may try to move away but when that is not possible you tense your muscles and possibly turn your head away. As a last resort, you may try to protect your space by placing an object such as a purse or a briefcase between you and the other person.

Eye contact

Eye contact is also an important nonverbal signal. When two people look at each other and smile or nod, this is usually understood to be a joint agreement to begin a conversation. As a good listener, you look at the other person's face, especially the eyes; looking away indicates that you are ready to end the conversation. The amount of eye contact you use can communicate emotions and attitudes. Avoiding eye contact conveys shame, embarrassment, anxiety, or a lack of confidence. The more eye contact you have, the more likely the other person will be to see you as friendly, mature, and sincere. However, this is only true up to the point where a normal gaze becomes a stare. Staring may make the other person feel nervous and defensive because it is seen as a sign of contempt or disapproval. To stare at someone is equivalent to saying, "I'm better than you" or "I don't approve of what you're doing."

A word of caution about interpreting eye contact: the rules for appropriate eye contact vary with sex, class, age, and culture. So, when another person avoids looking at you, for example, he or she may actually be frightened, embarrassed, depressed, or nervous or may simply belong to an ethnic group with different visual customs. For example, black children are taught to lower their eyes as a sign of respect for teachers and ministers.

Gestures

We use many different kinds of body movements to support our verbal communication. Some of these movements are conventional gestures such as a head nod for "yes." Other movements are unique to an individual or a situation (for example, a fraternity's secret handshake). Body movements serve two basic purposes for communication: they help to clarify the speaker's ideas or they express emotions and attitudes. Descriptive gestures help to illustrate objects or actions that are difficult to explain with words alone. You might use descriptive gestures to demonstrate how to kick a football, how to hold a baby, or how to eat with chopsticks. Gestures might also help you to tell someone how long the fish was that got away, how tall a basketball player is, or how you narrowly avoided an accident.

Most gestures associated with emotion are spontaneous and are not primarily intended to communicate. When you are tense, you may run your fingers through your hair, clutch the arms of the chair, play with an object, or move about aimlessly. Some gestural messages about emotion are sent deliberately—clapping to show approval or shaking your fist in anger.

Condescending gestures—such as patting the head of a mentally retarded adult—will damage a relationship.

Touching

Touching is another way we use our bodies to communicate. Greetings, farewells, and congratulations usually include physical contact. Touch may also be used to attract someone's attention so that you can begin a

conversation. Society defines the type of touching which is appropriate to a particular situation. For example, your culture may require you to greet someone by shaking hands, rubbing each other's noses, kissing, or embracing. Even though you are limited by cultural rules of behavior, you can still convey personal attitudes through touch. Usually, you initiate more body contact when you like a person and feel comfortable with him or her. People tolerate different amounts of touching, however, so be sure that you are not intruding into the other individual's personal space. Touching can be an effective way to communicate positive feelings if you are sincere and the contact does not make either person uncomfortable.

Facial expression

Perhaps the most important and the most carefully controlled nonverbal signal is facial expression. The face can display a world of emotions—happiness, anger, surprise, sadness, fear, disgust. Appropriate facial expressions can help you convey your ideas and attitudes more accurately than words alone. Yet, most of us have been taught not to show our feelings, especially if they are negative, so we adopt a deadpan facial expression. Expressing extreme rage may not be helpful, but it is certainly less confusing for your listener if you let your face show a degree of irritation rather than smiling while the rest of your body signals tension and anger.

Nonverbal language of handicapped people

Handicapped people send nonverbal messages, as well as receive them. Physical or mental disabilities, or a lack of experience, may prevent people from displaying socially acceptable nonverbal signals, especially those which are used to convey liking. Their body language may give the impression that they are bored, indifferent, or even hostile. Misinterpreting these unintentional and sometimes peculiar behaviors may affect the way you react to handicapped people. Appearance and behavior may conflict in a puzzling way. When a person's appearance sends the message, "This is an adult," we unconsciously expect adult behavior and we may be frustrated when the person doesn't meet this expectation.

Summary

Your ability to send and receive nonverbal messages accurately can be a positive asset in your relationships with other people. You are communicating all the time, even when you are not actually talking.

TIPS

1. Keep the distance between you and the listener appropriate to the relationship and situation.
2. Maintain casual and warm eye contact without staring.
3. Use gestures and facial expressions that are consistent with your meaning and feelings.
4. Use handshakes, pats on the back, and hugs to reinforce positive feelings when you and another person feel comfortable with these contacts.
5. Interpret a handicapped person's nonverbal language cautiously.

Session Three, Part Five

Communicating with Developmentally Disabled People

Purpose

To give advocates skills in communicating with people who have communication handicaps

Method

Trainer's presentation and group discussion

Materials

Copies for group members of the tips on the specific disabilities you will cover

Optional: Audio or video materials to simulate and explain handicaps

Trainer's presentation and group discussion

Tips on communicating with handicapped people

15-30 minutes for each disability

All of the general principles about communication presented so far in the training apply to communication with handicapped people. But when there are particular communication handicaps, such as mental retardation, hearing or vision impairments, or motor speech disorders, there are some special ways to facilitate communication.

The basic procedure for all four sets of tips (mental retardation, hearing impairment, vision impairment, and physical handicap) is the same:

- Hand out copies of the tips on the specific disability you will be covering.
- Give the group about 5 minutes to read the tips.
- Read the tips aloud, one at a time, and demonstrate or illustrate each point.
- Invite participation and questions from the advocates.

These tips basically provide information on things advocates can do to communicate effectively. But to gain skill in using the techniques, advocates need practice as well as information. You need to make the tips concrete and relevant to their own experience and to involve them in thinking of applications of the facts so that they will be ready to practice.

Suggestions for specific ways to involve trainees in the discussion are given below for a few of the tips on mental retardation. You can use similar techniques for involving trainees as you go over the other tips on mental retardation and other communication handicaps. In addition, some general suggestions for involving trainees are given in the tips for communicating with hearing impaired, visually impaired, or physically handicapped persons.

If you are following the recommended schedule for training and matching volunteers that is given in "Tips for Trainers," most of the group participants will have had some contact with their clients or proteges, so they should have plenty of questions and examples.

Encourage them to raise questions regarding their own encounters with disabled people by asking, "Has anyone here experienced this type of situation?" as you go over the tips. Ask them also to add tips to the lists on the basis of their experience if they have some ideas not included here.

Tips on communicating with a mentally retarded person

15-30 minutes

Tip #1. Ask advocates to look around the room you are in to see whether there would be ways to minimize distractions in this setting.

Tip #2. Demonstrate by touching the arm of one of the group members. Ask one of them to demonstrate turning the face of a person toward them and getting eye contact. Let each person practice with the person sitting next to him or her.

Tip #3. Ask a group member to illustrate speaking first nonexpressively and then expressively the words, "I drove my friend's little sports car today."

Tip #4. Ask an advocate to play the role of a low verbal person learning the task of folding a piece of paper in half, then in half again, as one might fold a four-panel brochure. First demonstrate the task. Then manipulate the person's arms and hands to do the job. Be sure to give verbal directions while demonstrating and giving sensory cues.

Tip #5. Demonstrate by rereading the tip with exaggerated inflections and excessively slow speech.

Tip #6. Ask an advocate what one might say instead of, "Let's get dressed now."

Illustrate or demonstrate the remaining tips in similar ways.

Tips on communicating with a hearing impaired person

15-30 minutes

Borrow a record from the public library, speech and hearing clinic, or the educational service center that simulates what a hearing impaired person hears. Two such records are:

1. "Getting Through: A Guide to Better Understanding of the Hard of Hearing"
   (Zenith Radio Corporation)
2. "How They Hear"
   (Gordon N. Stowe & Associates, 3217 Doolittle Drive, Northbrook, IL 60062 $11.00)

Playing such a record will help advocates understand hearing impairments and the necessity of minimizing their problems by following the suggestions in the tips.

Then review each of the tips, illustrating or demonstrating where possible.

Tips on communicating with a visually impaired person

15 minutes

The vision loss and its consequences for communication can be simulated by using blindfolds. You can illustrate the tips by having one advocate role play a blind person and two advocates role play people with normal sight, one whom the blind person knows and one to whom he or she will be introduced. The three, after introductions, should make plans to go to a restaurant together, arranging a date, place, time, and transportation, and asking each other's preferences about type of food and expense (or use any other role play situation that requires the interaction of three people).

After the three role players have completed their arrangements for going out to eat, discuss as a group how and when they used some of the suggestions in the tips. The person who played a blind person can tell how he or she felt at different times during the conversation. For example, when was he or she uncomfortable, which cues from the other speakers helped the most, did they ever overdo the cues and create feelings of ineptness? Group members who observed the role play can contribute their observations also.

Tips on communicating with a physically handicapped person

15 minutes

These tips are harder to demonstrate and illustrate than the tips on other disabilities because it is hard to simulate a motor speech disorder without seeming to ridicule and because the tips suggest appropriate attitudes and responses rather than overt behavior. Therefore, you will probably have to rely primarily on reading over the tips and encouraging questions and discussion.

If you have invited a communication specialist to this training session, he or she may demonstrate at this time some of the nonspeech modes of communication, such as communication boards and machine-generated speech. Or you may do such a demonstration yourself. For example, some people with severe motor speech disorders use the "Speak and Spell' developed by Texas Instruments. The person presses one of the letters on a keyboard and the appropriate letter is vocalized by the machine. The person thereby spells out each word of a sentence. Such a demonstration will (1) show the group how effectively a severely disabled person can overcome a speech disorder, and (2) help the people in the group get used to the idea of nonspeech communication.

"I Learned" Statements

5 minutes

When you have completed the presentation and discussion of tips on communicating with developmentally disabled people, bring the session to a close by asking the group to share "I learned" statements. See "Tips for Trainers" for directions.

Before adjourning, hand out copies of the background materials on effective communication, verbal and nonverbal communication, and listening skills and suggest that group members read this material at home.

Communicating with a Mentally Retarded Person

The effects of mental retardation on speech and language development may be so mild that the person has no speech problems or only minor articulation errors; or the effects may be so severe that the person will never develop functional speech.

Some people who lack *expressive* language (ability to speak, write, or gesture) have *receptive* language (ability to understand what is said to them).

Assess your protege's or client's verbal skills with an open mind. If the person has normal skills, you may not need to adjust your usual communication style. But if there are limitations, you must make extra efforts so that the protege will understand the issue and so that you will understand his or her point of view.

To avoid simply imposing your views on a retarded person, you need to take the time to explain and to listen.

Work with the person's parents, teachers, and social workers, and with the advocacy staff for suggestions on effective methods of communication. Being consistent with others who interact with the person will help him or her learn.

Some mentally retarded people have communication problems because their environments are limited. You will help them gain language ability and social interaction skills by letting them experience many normal activities.

TIPS

1. Try to keep your surroundings free from distractions. Remove any unnecessary objects in the area and keep background noise to a minimum. For example, turn off the radio and shut the window to reduce street sounds.

   If the person is too distracted by things happening in the room, you may need to move to another room or change location within the room. For example, in a busy coffee shop you might move to an isolated corner or sit with your backs to the activity.

2. Establish eye contact before you begin to speak, and maintain it as long as possible.

   Say the person's name often.

   Touch the person lightly on the arm or shoulder when you seem to be losing his or her attention. It may be necessary to move the face of a severely mentally retarded or highly distractible person toward you.

3. Speak expressively with appropriate gestures, facial expressions, and body movements. These nonverbal cues add information that make your ideas easier to understand. For example, when you say, "Let's go eat," to a person with a limited understanding of speech, you might gesture spooning food into your mouth.

4. Communicating with a person who does not have expressive language and who does not seem to respond to what you say requires frequent sensory cues. For example, mimic the activity you are talking about with gestures, physically move the person's hands, head, or feet to perform the activity you are describing, and try to get eye contact. Touch, hug, and pat in order to guide and affirm, combining these cues with the appropriate verbal comments. Resist your impulse to stop talking. Even if there is no apparent response, hearing your speech is good training for the retarded person.

5. Speak slowly and clearly, but don't exaggerate the inflection or tone of your voice. Exaggerations call attention to themselves rather than to what you are saying and are distracting and confusing.

6. Speak in "here and now" concrete terms. Give specific examples and demonstrate whenever possible. Instead of saying, "It's time to clean up" say, "Wash your hands in the bathroom now." Refer to "chair" instead of "furniture"; "apple" instead of "fruit"; "Mrs. Smith" instead of "your teacher."

7. Emphasize key words. For example, say, "Please bring me the *blue* glass."

   Repeat important statements, and use different words if the listener does not understand.

8. Be positive in giving directions. Instead of saying "Don't kick," say, "I'd like you to keep your feet on the floor." In this way you give the person a goal rather than calling attention to (and possibly reinforcing) inappropriate behavior.

9. Give directions immediately before the activity to be performed and avoid lists of things to do. If you say before you go into a restaurant, "When we get in the restaurant, you will first need to wash your hands, then come back to the table and unfold your napkin . . .," the retarded person may not remember and act on these directions without prompting. Instead, give the directions one at a time when you want the task performed.

10. Check frequently to be sure the person is understanding. It is pointless to ask, "Do you understand?" Instead, ask the person to repeat what you have said or ask a question that requires a specific answer, such as, "What are you supposed to do tomorrow?"

11. Ask open-ended and either-or questions rather than questions that can be answered with *yes* or *no*. Retarded people have a tendency to say *yes* when given a choice of yes or no, so such a response does not necessarily give you the right information. Instead, let the person describe a situation or give a choice of answers neither of which is obviously the right one. Be sure the alternatives you give cover all the possible situations.

    Examples

    yes-no question

    Did the man bite your arm?
    (the response will likely be yes)

    open-ended question

    Tell me what happened this morning.
    (the person must describe the situation)

    either-or questions

    Did this problem happen today or yesterday?

    Are you talking about a man or a woman?

    (neither alternative is obviously better; therefore the choice the person makes is likely to be accurate)

12. Don't pretend to understand. It is better to ask the person to repeat what he or she has said several times than to agree with something you don't understand. (You may be unpleasantly surprised when you find out what you have agreed to!) Say, "Tell me again." If you don't get a completely understandable answer, build from a particular point you can confirm. For example, ask, "Am I getting this right? This morning someone bit your arm."

13. Smile, nod, and lean forward while the speaker is talking. These signs that you are interested encourage the person to continue.

14. Be prepared to wait. The person with mental retardation may function slowly. Do not anticipate the speaker's response and finish sentences for him or her. Sometimes suggesting a key word the speaker is having trouble with will help the speaker keep going, but retarded people need to gain experience and confidence in their own speech.

15. When you note signs of fatigue, irritability, or disinterest, it is a good idea to change activities, slow down, make the task simpler, or take a break. One such sign is increased distractibility. Another sign is continued repetition of a response when it is no longer appropriate (for example, "want to go home," "time to go home," "want to go home").

16. Don't give a choice if you are not sincere. For example, don't say, "Would you like to come with me?" if the person *must* go with you. Instead say, "Let's go back to the cottage now." Giving choices when there are real options is good, though, because it reinforces decision-making. For example, say, "Would you like to come with me or would you like to stay at school?"

17. Sometimes the speech or behavior of a retarded person will be bizarre or otherwise inappropriate. The reason may be either lack of information and social skills or desire to get attention. How you respond will depend in part on the reason.

It is important to correct inappropriate speech or behavior resulting from lack of information. If you don't correct it you are essentially giving your approval and increasing the likelihood that it will happen again. For example, if a retarded person on a public bus begins to pat a stranger, try to divert the retarded person's attention and break the chain of events. You might do this by saying, "Please bring me my purse." Then explain with empathy and with regard for the person's self-esteem what the appropriate behavior is. For example, say, "That little girl you were touching is pretty, isn't she? But people don't touch each other until they are good friends. See how all the other people on the bus are holding their hands in their laps."

If the inappropriate behavior or speech is attention-getting, ignore it and direct the person to an appropriate topic or task. You might walk away, continue with what you are doing, repeat what you have been asking, or ask the person to do something that will interrupt the behavior or speech.

Give the person abundant attention when he or she behaves and speaks appropriately to diminish the need for negative attention.

18. Treat adults with mental retardation as adults, not as children. Use their proper names, and show respect when you introduce them to others. Consider the varying degrees of respect conveyed by the following introductions:

    "This is Billy. He's retarded."

    "This is Billy."

    "I'd like you to meet Bill Brown."

    When you praise an adult, do it appropriately. "You did a fine job" is certainly more appropriate for an adult than "That's a good boy." Avoid talking down to a retarded adult.

19. Talk *to* the mentally retarded person, not *about* him or her. No matter what the person's level of understanding, it is rude to discuss a person when he or she is present.

Communicating with a Hearing Impaired Person

Although some hearing impaired people possess adequate speech for basic social expression, those with profound hearing losses often do not learn to speak intelligibly. Thus, many deaf persons use written or manual communication as a supplement to or substitute for speech.

The term *manual communication* refers to several systems in which hand or body movements represent ideas, objects, actions, etc. If an idea cannot be expressed through manual signs, it is fingerspelled. *Fingerspelling* consists of twenty-six handshapes that correspond to the twenty-six letters of the Roman alphabet. Fingerspelling differs from *sign language*, which uses hand movements for words and phrases rather than single letters. To aid them in understanding the speech of others, hearing impaired people may rely on visible speech cues, facial expressions, and gestures, as well as the language and situational context. This method of using vision to partially compensate for hearing loss is called *speechreading* (formerly called lipreading).

Whatever special communication techniques your protege or client employs, there are several things you can do to make your communication more effective.

TIPS

1. The room should be sufficiently quiet to permit your voice to be heard with little difficulty. If there is background noise, such as footsteps, conversational babble, traffic rumbling by, loud heating and cooling units, minimize it as much as possible (close windows, turn off furnaces, move to a quieter room). Background noise may prevent the hearing impaired person from using residual hearing. Echo is less of a problem in small rooms and in rooms with carpet and drapery.

2. Position yourself directly in front of the person to whom you are speaking, rather than behind or to the side of him or her. Keep the distance between you as small as possible. Speechreading is easiest at five feet or less.

3. Try not to stand in front of a light source (for example, a window). Light behind you may throw shadows on your face and distort the normal movements of your mouth. The light should shine on your face rather than in the eyes of the person attempting to understand you.

4. Establish eye contact before you begin to speak. You may need to attract your listener's attention with a light touch on the arm or shoulder.

5. Provide a clear view of your face. Avoid actions which hide your mouth and reduce the accuracy of speechreading: resting your head on your hand, turning your head, waving your hands, smoking, chewing, and holding things in front of your face. Certain physical features can also affect speechreading. A moustache or beard may hinder speechreading by partially obscuring the mouth; lipstick may define the lips and enhance speechreading.

6. Speak clearly but naturally. Use your normal speed and loudness level unless asked to change. Speakers sometimes use a very slow rate, exaggerate their mouth movements, or shout, hoping to improve understanding. Actually, these efforts are more confusing than helpful.

7. Speak expressively; use gestures, facial expression, and body movements to convey mood and feeling. Deaf persons may misunderstand figures of speech ("the foot of a mountain"), puns, and sarcasm because they cannot hear the accompanying variations in tone, inflection, and stress. Thus, shrugging your shoulders, raising your eyebrows, or shaking your fist may relay an idea more accurately than words alone. Avoid exaggerated gestures, however, because these distract the attention of the speechreader from the basic point of focus—the face.

8. Use short, simple, complete sentences. Keep your language precise and concrete, rather than abstract. A general term such as "food" is more abstract than the word "apple," which refers to a specific fruit. Abstract words have vague meanings (for example, "nourishment in solid form"), which are difficult for the hearing impaired

person to grasp. Words which have many different meanings, such as "great," "down," and "over," are also confusing to the hearing impaired individual.

9. Repeat key words and statements and avoid changing the subject abruptly. Check comprehension frequently by asking questions or asking the listener to repeat what you have said. Deaf persons may pretend to understand when they do not (just as many hearing people do). When a hearing impaired person joins a group, make sure he or she knows the subject being talked about.

10. When a hearing impaired individual has difficulty understanding an important point, rephrase the idea rather than repeat the same words. Only one third of English sounds are visible to the speechreader. Words such as "king" and "her" cannot be speechread because they contain sounds which are produced by hidden movements inside the mouth. Many of the sounds which are visible are homophenous; that is, they look exactly like one or two other sounds. Therefore, the words "Pete," "beet," "mean," "bead," "bean," and "meat" appear the same to the speechreader.

11. If your listener is able to use some residual hearing, you may find it useful to lower your pitch somewhat. A high pitched voice (usually a woman's voice) is more difficult to understand.

12. Lacking the auditory feedback we use to monitor our own voices, the severely hearing impaired person may develop speech which is excessively loud, high pitched, monotonous, breathy, and nasal. If you have difficulty understanding a hearing impaired speaker, ask an open-ended question (for example, "Would you tell me about your family?"). A lengthy answer may give you time to become accustomed to the person's speech and language patterns. When you cannot understand a statement, ask the person to repeat or elaborate on what he or she has said. If this fails, a gestural or written mode of communication may be more effective than speech.

13. Do not assume that a deaf person's communication problems indicate a lack of intelligence. A profound hearing loss disrupts language acquisition to such an extent that deaf adults rarely have the verbal skills of a hearing 10-year-old child. The most obvious deficits in the language of the hearing impaired are a limited vocabulary and difficulty with syntax (arranging words into sentences). Reasons often cited for these problems are a lack of language stimulation and the fact that the syntactic rules of American Sign Language are quite different from the rules of English.

14. If you know any sign language, ask the person with whom you are talking if he or she would like for you to use it. Some people prefer to communicate through speech alone. Even if both of you agree to use signs, you may have difficulty communicating if you have learned different systems. Sign systems currently used in the United States include: American Sign Language (ASL), Systematic Sign Language, Signing Exact English, Seeing Essential English, Linguistics of Visual English, Signed English, and Manual English.

15. If your protege or client communicates primarily through signs and fingerspelling, and you are not familiar with this method, an interpreter may be necessary. An interpreter simply translates the conversation; he or she does not think or answer for the hearing impaired person. When using an interpreter, look at your protege or client and carry on the conversation as if talking to a person with normal hearing.

16. Watch for signs of fatigue in your listener. Following a conversation requires greater effort on the part of a hearing impaired individual, and the stress may make him or her tired, irritable, and tense. In addition, *tinnitus*, a noise or ringing in the ears, may be so annoying that it increases fatigue.

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Communicating with a Visually Impaired Person

Most people find it obvious that a disability which affects speech or hearing will interfere seriously with effective communication. The effect of a visual impairment, however, may not be so obvious. Harold Krents is an attorney who was blinded at age 9. Krents, who was the inspiration for the play and film, *Butterflies Are Free,* has found that some people speak to blind persons as if they were unable to speak or hear normally. People may exaggerate their pronunciation, shout, or whisper in front of a blind person.

TIPS

1. Introduce a blind person just as you would anyone else. It is inappropriate and also unnecessary to say, for example, "This is Jim Jones. Jim is blind."
2. Use words such as "look" and "see" comfortably. These words are a part of English vocabulary and it is unnatural to avoid using them.
3. When approaching a person with a visual handicap, always state your name. Unless he or she knows you well, do not expect a blind person to be able to identify you by your voice, especially in noisy surroundings.
4. Let the person with a visual problem know when you are about to leave. Do not walk away without saying anything.
5. If the person you are talking to has some limited vision, do not stand with your back to a window. The glare may be uncomfortable and cause eye fatigue for the person who has some vision.
6. A visually handicapped person may need verbal cues to help compensate for the loss of information usually obtained from facial expressions, gestures, and body movements. For example, persons with normal sight know when a question is directed toward them because the speaker looks at them. A blind person may not realize that a question is meant for him or her unless you preface it with his or her name ("Bob, what is your address?").
7. We normally judge whether a person is paying attention by the amount of eye contact used. When speaking to a person with a visual handicap, repeat his or her name often and ask questions to be sure he or she is "with" you.
8. Vision impairment does not necessarily mean a lack of intelligence. Be cautious in making assumptions and evaluations.

Communicating with a Physically Handicapped Person

The majority of people who have motor damage, especially those with cerebral palsy, have mild to moderate communication difficulties. Damage to the central nervous system may interfere with the production of speech sounds and with the rhythm and rate of speech. The most common characteristics of motor speech disorders are imprecise production of consonant sounds, slow effortful speech, and difficulty in control of pitch and loudness. When muscle function is impaired, speech may be accompanied by facial distortions, drooling, and random body movements.

These behaviors often distract listeners and make them feel uncomfortable; you may have to make a conscious effort to pay attention to what the speaker is saying. Also, the physical tension associated with speaking and the difficulty in being understood often discourage handicapped people from attempting to communicate; to overcome this reluctance, you need to be accepting, relaxed, and interested.

Severely physically handicapped people may not be able to communicate effectively with speech. As a supplement to or substitute for speech, these people may use one of the more than one hundred existing nonspeech systems. These nonspeech modes include sign language, pantomime, Morse code, communication boards (symbols printed on paper, cardboard, plastic, Masonite, or plywood), manipulatable symbols, drawn or written symbols, machine-generated speech, braille, and adapted electric typewriters.

The effect of the motor disability itself may be increased by hearing loss, mental retardation, defective oral sensation, seizures, perseveration, hyperactivity, distractibility, or psychological problems.

TIPS

1. When you meet a person with an unfamiliar disability, you may have to consciously avoid staring. At the same time, it is a mistake to avoid eye contact because you feel uncomfortable. Instead, look at the person in the same way you look at a nondisabled person, with eye contact and a smile or greeting.

2. Speech intelligibility of a person with a motor speech disorder will often improve after you become accustomed to the distorted speech pattern. You can obtain a good sample of the person's speech by asking a question which requires a lengthy answer (for example, "What do you enjoy doing?") or by having him or her read aloud.

3. Allow a long response time from someone who has a motor speech disorder. A physical disability may increase the time needed to initiate speech.

4. Do not be offended if a person who speaks with some physical tension seems reluctant to converse. This may be because of the great effort the person expends in order to speak. Encourage the person to speak and create an accepting atmosphere by using eye contact, smiling, leaning forward, and nodding.

5. If the person uses a nonspeech communication system, become acquainted with the way the system works and benefits. If you have reservations about nonvocal communication, you are likely to convey this attitude to the handicapped person. If, on the other hand, you are willing to accept the nonvocal method as a functional means of communicating, you will convey your respect to your protege or client. This can only enhance your relationship with him or her.

6. Respect the personal space of a person with a physical handicap. You must be close enough to be easily seen and heard, but realize that a person with a physical handicap may not be able to protect his or her personal space. Personal space includes any equipment an individual uses; leaning on a person's wheelchair, for example, is rude and may even seem threatening.

7. If the handicapped person must remain seated, try to sit also so that you can maintain the same eye level. Even if you maintain a comfortable distance, you may still appear to be threatening and dominant if you stand. This is the teacher-pupil or boss-employee position.

8. Be sensitive about touching someone with a neurological handicap. A pat on the back or a hug is a pleasant, positive experience for most people, but for someone with neurological damage, another person's touch may be irritating or even frightening. This does not mean that you should avoid touching completely; just move slowly so you don't startle the person and use firm pressure (a light touch may tickle).

9. To keep the attention of a hyperactive or distractible person, call the person's name frequently or touch him or her on the arm or shoulder. If the person cannot focus attention on one activity, limit the number of distractions, such as unnecessary furniture and equipment, bright, patterned wallpaper or carpet, or an uncovered window.

10. If you note signs of fatigue, anxiety, irritability, or disinterest, change activities, slow down, make the task simpler, or take a break. Perseveration (the continued repetition of a response when it is no longer appropriate) is likely to occur when an individual is tired, when situations change rapidly, or when a task is too difficult.

11. Physical handicaps and speech disorders do not mean a lack of intelligence. Focus on the person's abilities, not disabilities.

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Session Three

Resources

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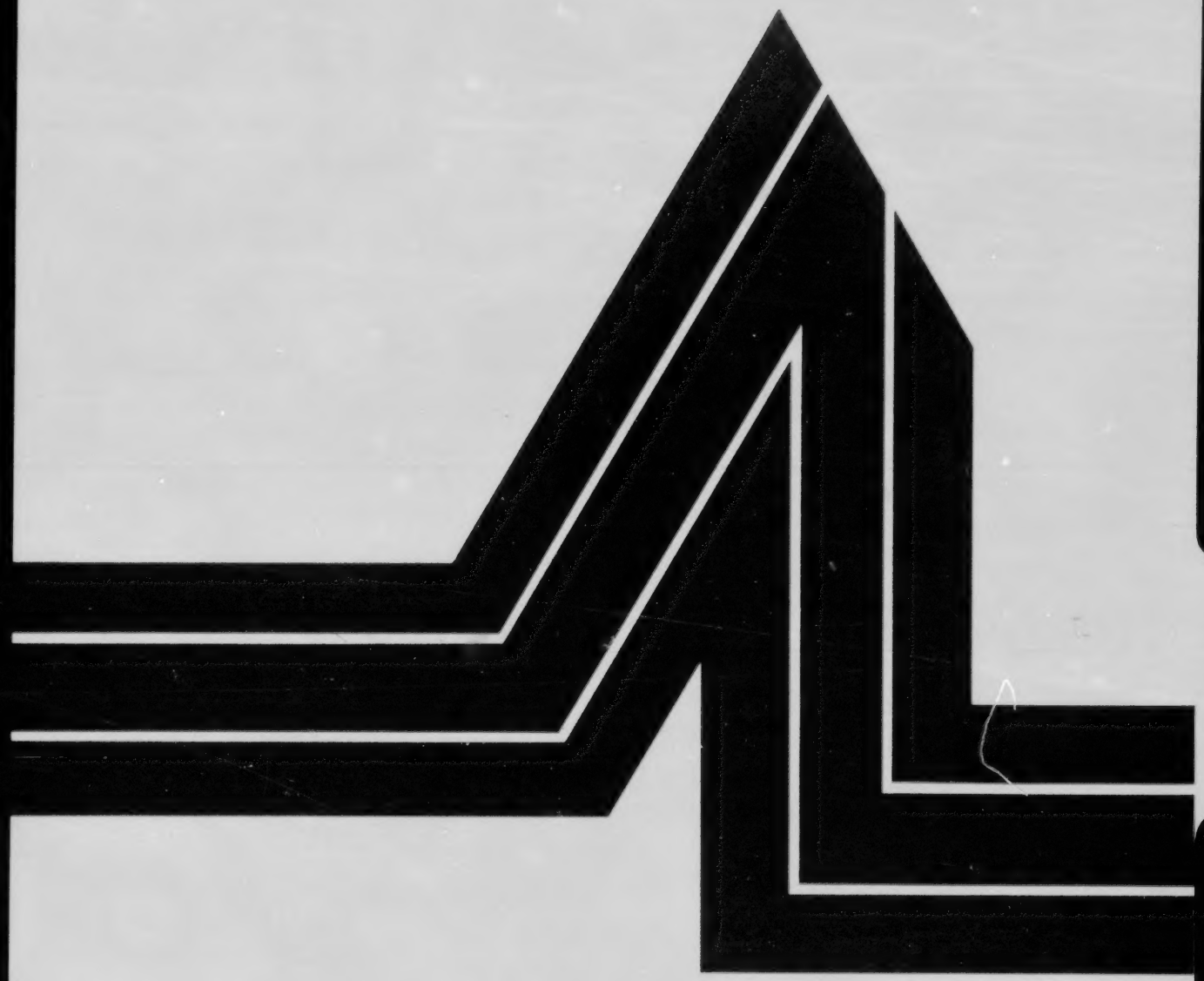
Session Four

Assertiveness



Session Four
Assertiveness

Purpose

To develop skills in acting assertively

Rationale

In their efforts to help developmentally disabled people realize their rights, advocates often encounter resistance from the people with power to make changes. To overcome this resistance requires assertiveness.

Topics, methods, and schedule

Part One: Introduction to Assertiveness

- Warm-up activity (*optional*)
- Group sharing: Defining the needs (10 minutes)
- Trainer's demonstration, illustration, and group practice: Assertiveness and alternatives (20 minutes)

Part Two: Verbal Assertiveness

- Illustration and worksheet: Five types of verbal assertions (15 minutes)
- Coaching a partner: Using verbal assertions (10 minutes)

Part Three: Nonverbal Assertiveness

- Trainer's presentation and discussion: Nonverbal assertiveness (10 minutes)
- Nonsense topics (option 1): Nonverbal behaviors (15 minutes)
- Guess how I feel (option 2): Nonverbal behaviors (15 minutes)
- Trainer's presentation and illustration: Nonverbal assertiveness (10 minutes)

Break

Part Four: Learning To Say "No"

- Role play: Refusing requests (10 minutes)
- Personal inventory: "About Saying 'No'" (10 minutes)
- Role play: Refusing requests: A second chance (10 minutes)

Part Five: Wrap-Up

Optional Activity 1*: Teaching Your Protege to Be Assertive

Optional Activity 2*: Expressing Positive Feelings

Materials

Pencils and paper for advocates

Materials as needed for a warm-up activity

Overhead projector

Transparencies: "Assertiveness and Alternatives"
"Verbal Assertiveness Skills"
"Nonverbal Assertiveness"

Role play situations for coaching a partner on verbal assertions

Slips of paper with nonsense topics written on them

Or: Slips of paper with "Guess how I feel" topics

Cards for writing compliments *(optional)*

Handouts

#4a, "Introduction to Assertiveness"

#4b, "Verbal Assertiveness"

#4c, "John's Participation in Physical Therapy"

#4d, "Nonverbal Assertiveness"

#4e, "About Saying 'No': Personal Inventory"

#4f, "Learning to Say 'No'"

#4g, "Putting It All Together"

Optional. (select according to the optional activities you choose)

#4h, "Teaching Your Protege to Be Assertive"

#4i, "Expressing Positive Feelings"

Preparations

Copy enough role play situations for the exercise on coaching a partner on verbal assertions for each pair to have a set.

Print nonsense topics on slips of paper, one for each group member, or print topics for the "Guess how I feel" exercise.

Make transparencies of: "Assertiveness and Alternatives"
"Verbal Assertiveness Skills"
"Nonverbal Assertiveness"

Reproduce any worksheets and handouts you will use.

*NOTE. One or more of these optional activities may be included in this training session after Part Four, before Wrap-Up; or they may be used in a follow-up session for groups who wish to pursue assertiveness training further.

Session Four, Part One

Introduction to Assertiveness

Purposes

To identify the advocates' needs for assertiveness skills

To define assertiveness and the alternatives

Methods

Group sharing

Trainer's demonstration

Illustration

Group practice

Materials

Transparency: "Assertiveness and Alternatives"

Introduction and group sharing

If group members do not know each other well or have not established a group identity, do one of the warm-up activities described in "Tips for Trainers."

Identifying the need

10 minutes

This session, like Session Three, should be practical, giving advocates skills to act assertively. To help advocates apply the material to their own experiences, begin the session by asking for examples of situations when they felt they needed assertiveness skills. These may be times when they were dealing directly with their clients or proteges or with others on behalf of their clients or proteges.

Ask group members if there have been situations when they:

- found themselves doing something they didn't really want to do and resenting it?
- felt ineffective when trying to make a point?
- persuaded someone to change his or her mind but at the cost of creating some bad feelings?

Give an example of your own experience if the group is reticent. For your own information, make notes of their responses for reference throughout the session. Ask the group to keep these situations in mind and to think of how the techniques presented could be useful in similar situations.

Define "assertiveness" as expressing oneself directly and openly without infringing on other people's rights. Point out that using assertiveness skills can help create positive outcomes in all one's encounters with other people, whether or not they are confrontive encounters.

Trainer's demonstration

Two alternatives to assertiveness are aggressiveness and passiveness. Before giving verbal definitions of these types

Assertiveness and alternatives

5 minutes

of behavior, demonstrate them so that group members can see for themselves what the behaviors are. Identify the behavior you are demonstrating. Be as extreme as you can in role playing various responses to the following situation.

Situation: Protege's landlord has ignored repeated requests for repairs needed in the protege's apartment. The protege has asked the advocate to talk to the landlord.

Aggressive: Mr. Barker, Joe tells me that you haven't repaired the leaky pipe in his apartment. You are being unreasonable and unfair, and I demand that you stop your excuses and repair that pipe now!

Passive: Mr. Barker, you know Joe has been having trouble with the plumbing in his apartment. I know you're busy and I hate to bother you with this, but if you have a chance, do you think you might be able to help somehow?

Assertive: Mr. Barker, Joe tells me that he has not been able to get you to repair the leaky pipe in his apartment. His lease agreement states that you will make repairs like that, and I would like for the repair to be made right away.

Transparency or chart

"Assertiveness and Alternatives"

10 minutes

Place the transparency, "Assertiveness and Alternatives," on the overhead (or display the chart). Cover the right column, "Features," and ask the advocates to describe each type of behavior as you demonstrate it. Move the paper down as you discuss each type. Supplement their comments by drawing from the background material entitled, "Introduction to Assertiveness." Next, ask the advocates to suggest reasons why people are reluctant to be assertive; again supplement their comments with the background material. Finally, discuss the personal rights which assertiveness protects. Possible responses to these topics are given in the background material, but it is okay if your group's comments differ.

Group practice

Assertiveness and alternatives

10 minutes

Give the group a chance to practice the three types of responses. You may be able to select a situation from those described during group sharing time. Or use one or more of the situations listed below. First have one advocate respond to the situation assertively. Then have another advocate respond aggressively and a third respond passively. Advocates should be as extreme as they can with the aggressive and passive statements

1. Your protege's employer refuses to build a ramp for her wheelchair.
2. Your protege's landlord raises the rent an extraordinary amount.
3. Your client is paid significantly less than his co-workers.

Assertiveness and Alternatives

	Example	*Features*
Aggressive:	**Mr. Barker, Joe tells me that you haven't repaired the leaky pipe in his apartment. You are being unreasonable and unfair, and I demand that you stop your excuses and repair that pipe now.**	**Emotionally loaded words Accusations, blaming "You" messages Name calling**
Passive:	**Mr. Barker, you know, Joe has been having trouble with the plumbing in his apartment. I know you're busy and I hate to bother you with this, but if you have a chance, do you think you might be able to help somehow?**	**Apologetic words Rambling Failure to come to the point Failure to say what you really mean**
Assertive:	**Mr. Barker, Joe tells me that he has not been able to get you to repair the leaky pipe in his apartment. His lease agreement states that you will make repairs like that, and I would like for the repair to be made right away.**	**Objective words that do not infringe on other people's rights Honest statement of feelings "I" messages Direct statements**

Introduction to Assertiveness

An important skill you will need in order to be an effective advocate is to express yourself directly and openly, that is, to be assertive. Assertive skills are not difficult to learn. They will help you as an advocate in approaching people who are not treating your protege or client fairly or with respect. They will also help you be a good friend to your protege. In addition, they will come in handy in many other aspects of your personal life besides your role as an advocate.

Being assertive means expressing your thoughts, feelings, and beliefs honestly and without infringing on other people's rights. You are being assertive when you deal effectively with people who may not be treating your protege or client fairly, and relate openly and honestly to your protege. Proper assertiveness will help you become an effective and satisfied advocate.

Alternatives to assertiveness

How is "assertiveness" special? There are basically two alternatives to being assertive. One alternative is to be passive. You are being passive if you do not express your thoughts, feelings, and beliefs honestly. If you are passive, you do not help your protege or client when he or she is treated unfairly because you won't approach the people who are mistreating him or her. In addition, it will be difficult to be open and honest with your protege or client. You may not be able to share your feelings. Because of this, your relationship may seem distant and unsatisfying. If you act passively, you may find the role of an advocate frustrating and discouraging.

The other alternative to being assertive is to be aggressive. You are being aggressive if you express your thoughts, feelings, and beliefs in a way that belittles another person. Everyone has the right to respect, and if you violate that right, others may begin to dislike and resent you. Being aggressive, then, may cause others, including your protege or client, to become distant from you and dislike you.

Fears about assertiveness

Many people are frightened by the thought of asserting themselves. If you have not had much experience asserting yourself, you may be wary of "standing up" to someone that you do not know well. This is understandable because society often gives messages that it is not okay to ask for what we need, and standing up to someone else, even when done for the benefit of your protege, can feel like you are attacking someone. Indeed, sometimes people mistake assertiveness for aggression, and some people who claim to be assertive are actually aggressive because they do not concern themselves with other people's rights and try to be "completely assertive" at all times. The important point here is that assertiveness is different from aggressiveness. Assertive behavior respects other people; aggressive behavior does not.

You may feel that you are being impolite when you assert yourself. Our culture gives the message, especially to women, that you cannot be polite and still protect your personal rights. However, politeness is defined many different ways, with the definitions varying widely. So, what exactly is polite and what is not is unclear. Is it polite to allow your protege's or client's rights to be violated? Is protecting his or her rights worth the risk of feeling "impolite" whether or not it actually is?

You may also balk at asserting yourself on behalf of your protege or client because you don't think that the violation of his or her rights is very major or serious. While the true seriousness of the problems will vary, remember that a developmentally disabled person's self-esteem is important and any lack of respect, even a small one, can help to erode that self-esteem. Your protege or client is an important person and deserves to be treated like one.

You may be afraid to be assertive because of possible negative consequences. Suppose, for example, that you assert yourself with your protege's or client's boss. Will the boss get angry with you and take it out on you or even your protege? Some people are very sensitive and may respond to appropriate assertiveness with backbiting or temper tantrums. However, in the vast majority of cases, people are not so childish. In addition, you will still be around to intervene if the person treats your protege unfairly. Realistically, people often are respectful of truly assertive individuals.

When to be assertive

Asserting yourself on behalf of your protege or client may make you feel that you "have to do

everything" for him or her. This is an important issue, because while you are helping your protege cope with special situations for which he or she may not have the necessary skills, you should not be "doing everything." In fact, one purpose of an advocacy program is to help your protege learn to be as independent as possible. If you take care of disabled people when they can handle a problem themselves, you are actually doing them a disservice. Thus, you must make judgments. Is the situation one where you need to intervene or can you help your protege learn to handle it? The answer to this question varies according to what the situation involves and what skills your protege or client has. You will need to make the final decision and act accordingly. Do what you think is best, and don't be afraid to make mistakes, because everyone does.

Consequences of passiveness and aggressiveness

Sometimes if you are passive and allow someone to mistreat your protege repeatedly, you may finally become so angry that you berate the person and demand that the mistreatment be stopped. In other words, you end up being aggressive because you were passive at first. Had you spoken up honestly when you first realized that your protege was being treated inappropriately, you probably would have been less angry and more assertive. Instead, you exploded into aggression. The point is that repeated passiveness can lead to aggression. If you are properly assertive, you do not usually find yourself feeling the need to be aggressive.

You may also overreact to violations of your protege's or client's rights because you are enraged that anyone could possibly take advantage of a handicapped person. You may feel that such people deserve punishment and don't deserve your respect. You are wrong. Often people do not respect disabled people because they are unaware, misinformed, frightened, or caught up in their own problems. They are not attempting to be mean. These people deserve respect, and you can give them personal respect while protecting your protege or client by being assertive rather than aggressive.

Overall, people prefer to be passive because it will avoid conflict and appease other people. Unfortunately, if you are passive, the result may be continued violations of your protege's or client's personal rights until you become aggressive, disrespectfully belittling others. People who violate your protege's rights need to be confronted; often they are simply unaware that a problem exists. They may just need a little extra "push" to fix the problem. Other people may be caught up in their own problems and have not tried to find a solution that will respect your protege or client while solving their problems. You will then be helping to find a more reasonable solution.

Personal rights

An important part of assertiveness training is to teach you to recognize and believe in personal rights for yourself and others. By being assertive, you can exercise your own rights, help your protege or client exercise his or her rights, and honor the rights of others. Some of the rights that you and everyone have are:

The right to ask for what you want

The right to privacy

The right to be treated with respect

The right to say "no" without feeling guilty

The right to structure your own time

The right to make mistakes

The right to express personal preferences

The right to ask questions

The right to be listened to and taken seriously

The right to judge your own behavior, thoughts, and emotions, and to take responsibility for them

The right to choose whether to assert yourself or not

Being an advocate does not mean that you have to give up your own rights in order to meet your protege's or client's needs; in fact, if you start to ignore your own rights, you will probably start to become angry and resentful. So do not ignore your own rights.

Moreover, being an assertive person does not mean that you have to behave assertively all the time. Sometimes you may choose not to assert yourself, and this is perfectly okay. However, the key word here is "choose." Choosing to be nonassertive is very different from keeping quiet due to intimidation or fear of the consequences; it means that you decide how you will handle a specific situation and behave accordingly.

Session Four, Part Two

Verbal Assertiveness

Purpose	To identify and develop skills in using verbal assertions
Methods	Illustration Paper-and-pencil exercise Coaching a partner
Materials	Transparency: "Verbal Assertions" Handout #4c, "John's Participation in Physical Therapy" Role play situations for "Coaching a partner" exercise

Transparency or chart

"Verbal Assertions"

10 minutes

To be assertive, a person needs to know what to say. That is, people need verbal skills.

Show the transparency (or display the chart) that illustrates the five types of verbal assertions. Cover the column, "Type of Assertion." Slide the cover down as you talk about each type of assertion. Draw on the background material, "Verbal Assertiveness," for your discussion. Demonstrate each type of assertion as you describe it.

Paper-and-pencil exercise

Identifying verbal assertions

10 minutes

Distribute handout #4c, "John's Participation in Physical Therapy." Have the advocates individually read the worksheet and write in the blanks what kinds of verbal assertions are being used. Then each advocate should write some brief comments. After everyone has finished, discuss the answers and the comments. The correct answers are:

basic assertion

empathic assertion

escalating assertion

confrontive assertion

workable compromise

In some situations, more than one assertive technique may be needed. For example, the advocate's second assertion is basically empathic, but it also includes an escalating assertion. Advocates may need to use more than one assertive technique at a time, especially when dealing with people in the community.

Coaching a partner*

Practicing verbal assertions

15 minutes

This exercise is a variation of role play, using "coaches" to give feedback to the players.

Divide the advocates into pairs and designate one member as the player and the other member as the coach. Have the advocates form groups consisting of two pairs (four people) each. In each group, have the two players role play while the coaches observe.

For the role play, use one of the situations that an advocate described during the group sharing time in Part One. Or use one or both of the situations included here. The aim of the exercise is for both players to be assertive.

After the role play, the coaches give feedback to the players. For example, the coaches can point out where different types of assertions worked especially well or where a player slipped into either aggressiveness or passiveness.

If time permits, let coaches and players reverse roles and role play a second situation.

*NOTE. This exercise was adapted from *Training Volunteer Leaders*, 1974, by the Research and Development Division, National Council of Young Men's Christian Associations (291 Broadway, New York, NY 10007), p. 78, and used by permission.

Verbal Assertions

Situation	*Type of Assertion*
1. David has attempted to enroll in a swimming class. The instructor says he is not certain that he wants disabled people in the class. David wants to learn to swim, and he would like to enroll in your class.	Basic assertion
2. You are sitting in a restaurant with Julie, who has a severe facial tic. The waitress looks frightened and does not approach your table. You say to the waitress: I understand that you are uncomfortable because of Julie's appearance. But we're just here to eat, and we'd like to order now.	Empathic assertion
3. Steve is in a wheelchair, and you are at a grocery store shopping with him. Your path is blocked by a cart, and the person attending the cart is talking to someone else and does not move the cart for you. Excuse me, we would like to get through. Would you please move your cart for us? If you don't move your cart, I'll move it.	Escalating assertion

Verbal Assertions
(continued)

Situation	*Type of Assertion*
4. You have asked Frank's boss to call you if Frank does not come in for work. While talking with the boss one day, she mentions that Frank was absent several times in the past week. I asked you to call me if Frank did not come in to work so that I could find out what happened. You didn't call me. If there is a problem with calling me, I'd like to discuss it because I want Frank to be coming in to work every day. Will you call me, or is there a problem with doing that?	Confrontive assertion
5. Carol informs you that she has to work late on Mondays without pay. You approach Carol's boss and say: If you want Carol to work late on Mondays, I would like for her to be able to come in late on Tuesdays. Does that sound acceptable to you?	Workable compromise

John's Participation in Physical Therapy

John is supposed to be released from his job for one hour each afternoon in order to attend physical therapy. John tells you that his boss has not allowed him to leave work for his class for several days in a row. You approach John's boss to discuss the situation.

Type of Assertion

Advocate:	Mr. Anderson, John tells me that he has not been able to go to his physical therapy for the past few days. His work contract states that he gets an hour off each afternoon, and I would like for him to go to his class.	_____
Mr. Anderson:	Well, we've just been really busy the past few days, and I haven't been able to give anyone much time off.	
Advocate:	Sounds like you're all having to work very hard. I understand that it must make things difficult for you, but John needs to go to his class every day, and I would like for him to be there.	_____
Mr. Anderson:	Well, we're really short-handed, and I just don't know if I can really help.	
Advocate:	John needs physical therapy, and I would like for you to see that he goes to therapy every day.	_____
Mr. Anderson:	Well, if I start making special allowances for John, I may create a real problem among the other employees.	
Advocate:	Mr. Anderson, when John contracted to work for you, an hour for his class was contracted for each afternoon. John needs his class, and I want you to uphold your end of the agreement that you made when you hired him.	_____
Mr. Anderson:	Well, I don't know. See, John's been coming in late a lot, and he just isn't getting his work done.	
Advocate:	I was not aware that John was coming in late. How about this? I'll see that John starts coming in on time if you'll make sure that he gets off in order to go to his physical therapy class.	_____
Mr. Anderson:	I guess that sounds fair. Okay, let's give it a try.	

Comment briefly on the dialogue.

1. What impression do you think the advocate made on Mr. Anderson?

2. Make at least two specific suggestions about how the advocate's statements could have been improved.

Advocate

Your protege, Maria, lives in an institution. All the residents are assigned daily chores, such as cleaning the tables after meals, distributing fresh linens, and dusting the living room. Everyone agrees that cleaning the bathrooms is the most unpleasant chore of all. Although the chores are typically alternated among various residents, Maria has been assigned the chore of cleaning the bathrooms every day for the past 2 weeks. When Maria asked the cottage parent, Mr. Hobbs, if she could have a different assignment, he said that the cottage parent, not the residents, will decide how the chores are assigned, and Maria must continue to clean the bathrooms until Mr. Hobbs says otherwise.

Cottage parent, Mr. Hobbs

You are a cottage parent for eight moderately retarded young adolescent girls. One of your policies is to have the residents alternate housekeeping chores, such as cleaning the tables after meals, distributing fresh linens, dusting the living room, and cleaning the bathrooms. Everyone agrees that cleaning the bathrooms is the most unpleasant chore of all. One of the residents, Maria, has been a problem in this chore rotation, because she breaks an excessive number of dishes when she cleans the tables and she never gets the linens distributed correctly. You have told her that her job will be to clean the bathrooms until she can pay better attention to her duties at the other chores. You feel your job is demanding enough as it is without the added responsibility of redoing a task the resident does improperly. You also feel pretty stubborn about the fact that you are in charge at the cottage, and you resent both residents and outsiders trying to tell you how to do your job.

Advocate

John Jones is a senior in high school and is blind. He has recently moved with his family to a new city and new school district. John is accustomed to using a seeing eye dog and a tape recorder in his classes. He has been told by the school principal that he will not be able to use either the dog or the recorder in the school. John is anxious to participate in normal school activities as much as possible. You are John's advocate and he has explained his problem to you. The school principal has agreed to meet with you to talk over the problem.

School principal

John Jones is a senior in high school and is blind. He has recently moved into a new city and new school district. John is accustomed to using a seeing eye dog and a tape recorder in his classes. You are the principal of the school which John attends. You have told him that he will not be able to use either a tape recorder or the dog on the basis that they will be disruptive to the other students. John's advocate has asked for an appointment to talk over the problem. You are prepared to offer him a teacher from the home-bound student program to help him with his studies.

Verbal Assertiveness

Several different types of assertive skills (or assertions) are useful when you need to intervene in order to protect your protege's or client's rights.

Basic assertion

A basic assertion is the simplest assertive behavior. In a basic assertion, you simply express your belief or feeling on behalf of your protege or client. For example:

> Joanne has difficulty counting money. She receives insufficient change following a purchase, but does not realize it. *Basic assertion:* "My friend did not receive correct change."
>
> David has attempted to enroll in a swimming class. The swimming instructor says that he is not certain that he wants handicapped people in the class. *Basic assertion:* "My friend wants to learn to swim and would like to enroll in your class."
>
> Susan has not received her paycheck, and may be late in paying rent. You approach Susan's boss. *Basic assertion:* "My friend needs her paycheck so that she can pay rent."

Basic assertion, then, is either a simple statement of the problem (did not receive correct change) or what is needed (to enroll in the swimming class or receive a paycheck). These statements present feelings, thoughts, and beliefs in an honest manner. Contrast this with passive behavior:

> When Joanne receives insufficient change, you do not approach the cashier. Instead, you leave and Joanne has lost money.
>
> When the swimming instructor hesitates about enrolling David, you think, "Well, I guess he's right," and David does not enroll.
>
> When Susan's paycheck is late, you do not approach the boss; the result is late rent and possible eviction.

Passiveness, then, results in a violation of personal rights of the disabled person. Your other option, aggressiveness, may have a similar outcome:

> When Joanne receives incorrect change, you berate the cashier by saying, "Can't you count money?"
>
> When the swimming instructor hesitates, you shout, "You are crazy if you think my friend can't learn to swim."
>
> When Susan's paycheck is late, you tell the boss, "This is silly, inexcusable, and insensitive."

In each of these cases, you have violated the other person's right to respect. Not only have you belittled the other person, but he or she probably will not want to cooperate with you and as a result may violate your protege's or client's rights.

Empathic assertion

Being assertive does not mean that you ignore other people's feelings. To the contrary, other people's feelings are important, just as yours and your protege's are. By acknowledging other people's feelings, you can help them to be more comfortable with and perhaps less frightened of and unfair to handicapped people. For example:

> You are sitting in a restaurant with Julie. Your friend has a severe facial tic. The waitress looks frightened and does not approach your table. *Empathic assertion* (to waitress): "I understand that you are uncomfortable because of my friend's appearance. We are just here to eat and would like to order now."

By acknowledging the other person's feelings, you are saying, "I understand." You are also asserting your feelings. This makes a good response more likely.

Escalating assertion

When helping to protect your protege's or client's personal rights, you may need to make more than one assertive response. It is amazing, in fact, how often simply repeating a request will result in a satisfactory reply. Sometimes, this repeated request must be made in increasingly direct terms:

> Steve is in a wheelchair, and you are at a grocery store shopping with him. Your path is blocked by a shopping cart, and the person attending the cart is talking to someone else and does not move the cart for you.

NOTE. Based on *Responsible Assertive Behavior*, 1976, by Arthur J. Lange and Patricia Jakubowski (Research Press, 612 North Mattis Avenue, Champaign, IL 61820), and used by permission.

Escalating assertion: "Excuse me, we would like to get through." "Would you please move your cart for us?" "If you do not move your cart, I will move it." You would not make all these assertions at the same time. Each is an escalation of the previous one and should be used only if the previous one got no results.

Repeating or "escalating" your assertion in the same words may also be effective.

Confrontive assertion

A confrontive assertion is useful when an individual has promised to do something for your protege or client or correct a problem that exists and has failed to do so. Confrontive assertions generally contain a statement of the original request statement indicating that the original request was not answered, and a request that it be carried through.

You have asked Frank's boss to call if Frank does not come in for work. While talking with the boss one day, she mentions that Frank was absent several times in the past week. *Confrontive assertion:* "I asked you to call me if my friend did not come to work so that I could find out what happened. You didn't call me. If there is a problem with calling me, I'd like to discuss it because I want Frank to be coming in to work every day. Will you call me, or is there a problem with doing that?"

Workable compromise

Often, a compromise can be reached where your protege or client can get his or her needs met through a give-and-take agreement. For example:

Carol informs you that she has to work late on Mondays, without pay. You approach Carol's boss and suggest the compromise that your protege can work late Mondays if she can come in late on Tuesdays.

You will always need to be careful that the compromises you offer are desirable to another person. For example, if Carol does not want to work late under any circumstances, you should not offer the compromise. Don't assume that you can read another person's mind or guess his or her wishes; always ask your protege or client how he or she feels about the situation and what his or her wishes are.

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Session Four, Part Three

Nonverbal Assertiveness

Purpose

To identify the nonverbal behaviors that characterize assertiveness and one's own nonverbal behaviors

Methods

Trainer's presentation

"Nonsense topics" or "Guess how I feel" exercise

Trainer's presentation and illustration

Materials

Slips of paper with nonsense topics written on them

Or: Slips of paper with "Guess how I feel" topics

Transparency and handout: "Nonverbal Assertiveness"

Trainer's presentation and discussion

Nonverbal assertiveness

10 minutes

So far the group has talked about what words to use when being assertive. Body language, or nonverbal communication, is an important part of assertiveness, too.

First, have the advocates name behaviors that people respond to besides a person's words. They will usually name most of them: eye contact, facial expressions, body posture, hand gestures and touching, voice tone, volume, and speed.

Refer to the "Coaching a partner" exercise just completed and ask group members to identify the nonverbal behaviors of the people speaking assertively (such as leaning forward, eye contact). Then ask the group to describe (without reference to any particular group member) the nonverbal behavior of a passive person (such as slumping, lowered eyes, hand wringing) and of an aggressive person (such as leaning back defiantly, glaring). Observe that the outcome of an encounter between two speakers is influenced not just by words but also by how assertive a person is nonverbally.

Then complete one of the two exercises on nonverbal behavior below to further illustrate different types of nonverbal behavior and their effects.

Nonsense topics*

15 minutes

Nonverbal behaviors

(option 1)

Explain that the purpose of this activity is to become aware of nonverbal behaviors and to give each advocate a chance to find out what other people like about his or her nonverbal behavior.

Place face down on a table the slips of paper on which you have written nonsense topics (such as lint, watches, pins, Kleenex, light bulbs, paper). Advocates form groups of three, and each person randomly selects a nonsense topic. Each

*NOTE. This exercise was adapted from *Responsible Assertive Behavior: Cognitive/Behavioral Procedures for Trainers,* 1976, by Arthur J. Lange and Patricia Jakubowski (Research Press, 2612 North Mattis, Champaign, IL 61820), p. 72, and used by permission.

person then talks for about a minute and a half about the topic while the other two group members listen. The listeners should not comment but should be identifying the nonverbal behaviors that are holding their attention.

Let all three people in the group speak on their nonsense topic before the listeners give any feedback so that advocates will not imitate behaviors for which previous speakers were praised. After all three people have spoken, the listeners tell each speaker what they *liked* about the speaker's nonverbal behaviors. The feedback should focus on how the speaker came across (nonverbal behaviors) rather than on what was said (verbal content).

This exercise will make the advocates aware of the fact that their nonverbal behaviors influence how they are perceived by others. Without focusing directly on poor nonverbal behaviors, it will identify which nonverbal behaviors each advocate does well and will stimulate them to consider nonverbal behaviors that they might wish to change.

Guess how I feel*

Nonverbal behaviors

15 minutes

(option 2)

This exercise will illustrate how people reveal their feelings through their behavior.

The group will talk about some topic of interest to the group but one person will not participate with words. He or she will participate by acting out the behavior described on one of the slips of paper. The other group members will watch this person as they carry on their discussion. After a minute or so, the discussion will stop and the group will guess what feelings the person was communicating. A second person then draws a slip and the discussion and guessing is repeated.

Place face down on the table the slips of paper on which you have written the behaviors listed below, one behavior for each slip. Ask a volunteer to draw one of the slips.

Continue with the exercise as long as it seems helpful.

The discussion topic can be assertiveness, or any other topic that you want to bring up with the group.

Behaviors

1. You are eager to get the meeting over as you have a very important engagement and you should be there now.
2. The topic is dull. You're not interested at all.
3. You are afraid they are going to ask you to do something you don't want to do.
4. You are highly excited and interested in what the group is doing.

*NOTE. This exercise was adapted from *Training Volunteer Leaders*, 1974, by the Research and Development Division, National Council of Young Men's christian Associations (291 Broadway, New York, NY 10007), p. 66, and used by permission.

5. You are worried about a big task you have to do tomorrow.
6. You are mad at the chairman.
7. You are just dog tired.
8. You don't feel well.
9. You feel no one is aware of your presence.
10. You wish you were someplace else.
11. You have something very important you want to say.

    (Make up your own.)

Transparency and handout and trainer's demonstration

"Nonverbal Assertiveness"

10 minutes

The illustration on the reverse side of the background material, "Nonverbal Assertivenss," may be made into a transparency and shown on the overhead projector. Or, pass out copies of that handout (#4d) now, and ask advocates to study the picture to identify the features of nonverbal assertiveness. Supplement their comments, drawing from the background material, "Nonverbal Assertiveness." Demonstrate each nonverbal skill as you describe it, using advocates as your partners (for example, shake hands firmly with one, using good eye contact).

Break

When you have completed the exercises on nonverbal assertiveness, give the group a 10-minute break.

Nonverbal Assertiveness

Body language is an important part of assertiveness. It is important to know how to use your nonverbal language in order to be appropriately assertive.

Eye contact

Making eye contact with another person and using appropriate facial expressions are important in successful assertiveness. When you look another person in the eyes, you indicate to that person that you are speaking directly to him or her and are sincere about what you are saying. Passive individuals often avoid eye contact, and end up looking nervous, uncertain, and uncomfortable. This does not help get a point across to another person. Aggressive people, on the other hand, may try to "stare down" the other person. This violates other people's rights by attempting to make them nervous and uncomfortable. If other people feel this way, they are liable to try to get away, be uncooperative, or become aggressive themselves. The key to eye contact, then, is to look at the other person while not staring threateningly.

Facial expression

Using appropriate facial expressions is also important. If you say, "Good morning," with a smile on your face, you convey the message that you are happy and sincere about what you said. If you say, "Good morning," with a frown or scowl, or with a blank, expressionless face, people will question whether or not you mean what you said. Appropriate eye contact and facial expression, then, can reinforce verbal assertions and add to the words.

Touching

Touching is also useful in asserting yourself. When you approach someone whom you may not know well, a firm, solid handshake is an effective greeting that communicates sincerity and self-confidence. The "limp" passive handshake and the "crusher" aggressive handshake will probably receive an undesirable response from the other person. Other kinds of physical contact may also be important in your relationship with your protege. An arm around the shoulder, a hug, or an affectionate, encouraging pat on the back are all very effective ways to say, "I like you" and "I believe in you." Be careful to convey respect in these as well as other interactions; if your protege is an adult, treat him or her like one. For example, do not show your affection by patting an adult on the head, as you might do for a child.

Body position

The position of your body is also an important aspect of effective assertiveness. Facing the other person, leaning toward him or her, and holding your head straight all indicate that you mean what you say and that you are dealing with the person in an honest and straightforward fashion. Standing too close can make others nervous, and you are less effectively heard if you stand too far away. A comfortable, middle distance from the person with whom you are talking is good.

Voice tone and volume

The volume and tone of your voice are important. Nonassertive individuals often speak in soft, high whispers that carry little power or emphasis. Their messages are often treated as being unimportant. Shouting, on the other hand, is an aggressive behavior that can lead to arguments and defensiveness. You need to be convincing without being threatening. A level, conversational tone of voice works well.

Nonverbal Assertiveness

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Session Four, Part Four

Learning To Say "No"

Purpose	To develop confidence and skill in saying "no" assertively
Methods	Role play Personal inventory
Materials	Handout #4e, "About Saying 'No': Personal Inventory" Handout #4f, "Learning To Say 'No' "

Role play

*Refusing requests**

10 minutes

Most of the situations the group has looked at so far involve someone taking advantage of a developmentally disabled person. Other kinds of situations call for advocates to be assertive, too. For example, being able to say "no" to someone is a specific form of assertive behavior. It is also a hard thing for many people to do. But saying "yes" when you want to say "no" can mean doing things you feel you should not do or don't want to do, and that causes guilt and resentment.

Advocates may need to say "no" to clients or proteges who are being unnecessarily dependent, to program coordinators who suggest advocacy strategies the advocate feels are inappropriate, or to professionals who want the advocate to undertake a task the professional should be doing.

This exercise in refusing requests will illustrate the difficulty of saying "no."

Have the advocates form pairs. Ask one person in each pair to identify a personal belonging that is important to him or her. The other member of the pair tries to borrow the object. The borrower should press for a "yes" answer by using every possible manipulation (flattery, guilt, pressure, crisis, condescension, helplessness). Take about 2 minutes for the role play.

Even in a hypothetical situation, sometimes it is hard to say "no." Ask how many advocates were able to say "no" in their role play. Ask those who said "yes" why they did so.

Then reverse roles. This time, the advocate should agree to loan something to the borrower for a specific period of time. For example, perhaps an advocate agreed to loan his bicycle to his protege to get home. Then the borrower introduces new information, making the agreement progressively more

*NOTE. This exercise was adapted from *Responsible Assertive Behavior: Cognitive/Behavioral Procedures for Trainers*, 1976, by Authur J. Lange and Patricia Jakubowski (Research Press, 2612 North Mattis, Champaign, IL 61820), pp. 102-103, and used by permission.

demanding and unreasonable. For example, maybe the borrower wants to keep the bicycle for a week, then for a month, then for an unspecified period of time. Again, spend about 2 minutes on the role play.

Then find out how many advocates said "no." Ask those who said "yes" why they gave in.

Personal inventory

"About Saying 'No' "

#4e

10 minutes

Pass out handout #4e, "About Saying 'No': Personal Inventory," and ask the advocates to complete it. Then explain that the more strongly they agree with the items, the more likely they are to have trouble saying "no" assertively. Discuss each item, using the background material, "Learning To Say 'No'." The background material parallels the items on the inventory, so in discussing the items you can proceed through the background material from beginning to end. One concept advocates may have particular trouble with is giving excuses (as opposed to giving reasons). To explain the problems people create for themselves by giving excuses (which may be dishonest), refer if possible to the role playing the advocates have just completed. Some advocates may have been trapped by their excuses into saying "yes" because a borrower saw through the excuse.

Role play

Refusing requests: A second chance

10 minutes

Repeat the role plays, giving each advocate another chance to practice saying "no," this time more aware of the pressure to say "yes" and the right to say "no." Remind them to use their five types of verbal assertions and their nonverbal assertiveness skills. This time, instead of borrowing an object, one person could ask the other to do something which violates a principle the second person believes in. For example, a protege could ask an advocate to bring a book from the library, but the advocate thinks this is something the protege should do independently. Allow 2 minutes, reverse roles, and allow 2 more minutes. Then let the advocates report how they did this time and how they felt about it.

NOTE. Before Part Five ("Wrap-Up") you may want to do one or more of the optional activities described at the end of this session.

About Saying "No"

Personal Inventory

For each item, indicate how strongly you agree or disagree by marking an "X" at the appropriate point on the line.

	Strongly disagree	Disagree	No opinion	Agree	Strongly agree
1. I want to be liked and accepted by others.					
2. I think that I am capable of doing many things, and I like to use my abilities.					
3. If I have to say "no" to someone, I usually try to give some excuse for why I can't comply.					
4. When someone makes a request of me, I sometimes say "yes" knowing that I actually won't follow through.					
5. Sometimes if someone asks me to do something, I get angry and respond by complaining or criticizing.					
6. I am uncomfortable saying "no" without giving some explanation or suggesting some other solution.					
7. When I am caught off guard, I tend to say "yes" almost as a reflex.					
8. If I tell someone "no" but the person presses me to change my mind, I usually give in.					

Learning To Say "No"

Many people have a very difficult time simply saying "no." Instead we make up excuses when the truth is that we do not want to do what someone has requested. Or we may give in and say "yes" when we really wanted to say "no."

Advocates may need to say "no" to a protege or client who is demanding an unreasonable amount of time or attention or who wants help he or she doesn't need. Advocates may also need to say "no" at times to the program coordinator if the coordinator advises some action that the advocate thinks is not in the best interest of the developmentally disabled person. And, advocates may need to say "no" to professionals working with the client or protege who want the advocate to undertake some task that is really the responsibility of the professional. In all of these situations, saying "no" is potentially difficult.

Why people have difficulty saying "no"

Two major reasons why we sometimes resist saying "no" are that we want to be accepted by everyone and we want to be perfect. First, many of us strive for *acceptance*. We want everyone to like us, and we think that saying "no" to someone will make that person disapprove of us. Of course, this is an impossible goal, since no one can please everyone all the time. Also, by compromising our own ideals and inconveniencing ourselves, we lose self-respect.

Second, many of us strive for *perfection;* that is, we want to believe that we can do anything, and in order to prove it, we comply with every request that is made of us. Eventually this reaches the point of letting others take advantage of us. In addition to the wear and tear that come with trying to be perfect, we may build up resentments toward others.

Unsatisfactory ways of saying "no"

Since there clearly are times when it's important to say "no," you need to learn how to do so. There are several unsatisfactory ways of saying "no" that many of us resort to at times.

First, you can be passive by offering an unsound or untrue excuse. You can claim that you are refusing, not by choice but due to circumstances beyond your control. For example:

Protege: Will you fix my bike?

Advocate: No, I can't. I really don't know anything about repairing bicycles.

Protege: Well, Mary said you fixed her bike last week. How did you know how to fix hers?

You are not obligated to explain your reasoning to others and should not feel pressed to make up some excuse that you think sounds acceptable. Also, it can be very embarrassing and hurtful if the other person realizes that your excuse is unsound.

An aggressive way is to say "no" with resentment, hostility, and abuse. This might include criticizing, complaining, or ridiculing. For example:

Protege: Will you fix my bike?

Advocate: No! You're just being lazy. You fix your own bike, and stop bothering me about it.

While this gets you out of complying with the request, it generates bad feelings and is clearly unacceptable.

An indirectly aggressive way is to agree to comply and then fail to follow through. This allows you to avoid the discomfort of saying "no"; but it is dishonest and in the long run causes trouble.

How to say "no"

There are three assertive ways of saying "no." First, you can simply say "no" without further comment or explanation. You are not obligated to explain yourself to others and you may choose not to do so. Simply say, "No, I don't want to do that" or "No, thanks, but I won't do that." Being honest and direct does not mean you need to be abusive or hostile. Just maintain a calm, matter-of-fact tone, and emphasize "I don't want to" or "I won't" rather than "I can't because."

Second, you may sometimes choose to offer an explanation or suggestion along with your "no." Explanations let the other person know the reason behind your choice. Unlike excuses, explanations make it clear that the choice is yours rather than being due to some outside force. For example:

Protege: Will you fix my bike?

Advocate: No, I know you can fix it yourself and I think you need to do things for yourself as much as possible. So I'd like for you to fix the bicycle yourself.

Or you could suggest some other solution for the person making the request. For example, you might suggest someone else who could help, or you might be willing to comply yourself in a different way or at a different time. Remember, you are not obligated to offer any explanation or solution, but sometimes you may choose to do so if you wish to explain or help.

A third way of responding assertively is to withhold your decision until you have had time to think about it. When you find yourself caught off guard, you may tend to say "yes" almost as a reflex. You are not obligated to answer most requests immediately. "I'd like to think about it" is usually a perfectly acceptable response.

Dealing with persistent people

You can't always expect other people to accept or understand your refusal the first time you say it. People may try to make you change your mind by trying to make you feel guilty or manipulating you in some other way. Many of us tend to say "no" once or twice and then give in when pressured. For example:

Protege: Will you fix my bike?

Advocate: You know how to do it.

Protege: Aw, come on, please.

Advocate: Well, okay.

Friends and family members often know how to create this pressure. Of course, sometimes it is legitimate to change your mind. But it should be a choice you make because you want to, not because someone manipulated you.

And if you choose to stick with your "no" reply, you can use the assertive techniques we learned earlier—basic assertion, empathic assertion, escalating assertion, confrontive assertion, workable compromise. For example:

Protege: Will you fix my bike?

Advocate: No, I really want you to do it. (basic assertion)

Protege: Aw, come on, please.

Advocate: I know you like for me to do things for you, but you know how to do it. I'd really like for you to fix it yourself. (empathic assertion)

Protege: Don't you care about me?

Advocate: Yes, I care about you. I want you to be able to do just as much as you can by yourself. So I want you to fix your own bike, okay? (empathic assertion and escalating assertion)

Protege: Please?

Advocate: No. I don't think you're listening to what I'm saying. You know how to fix your bicycle, and I want you to do it yourself. Why don't you do it now, and I'll watch, okay? (confrontive assertion and workable compromise)

Protege: Okay.

All you need to do is repeat your statement over and over until the other person gets the point. There is no need to respond with passive excuses or aggressive abuse.

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Session Four, Part Five

Wrap-Up

Purpose	To give advocates a chance to express their feelings about assertiveness and ask questions
Method	"I learned" statements
Materials	Background materials that you have not already distributed
"I learned" statements *Assertiveness* 5 minutes	Following the instructions in "Tips for Trainers," have the group do "I learned" statements. Start the activity by sharing some new insight you have had during the session about assertiveness or about the group.
Trainer's presentation *"Putting it all together"* #4g 5 minutes	Using the background material entitled, "Putting It All Together," close by reminding the advocates that learning new skills takes practice and patience and that their skills will improve as they use them. Also, caution them against going overboard and saying "no" all the time. Remind them that their clients or proteges need a chance to be assertive, too. Good advocates will always judge whether developmentally disabled people can do things for themselves before being assertive for them. Distribute the background materials, "Introduction to Assertiveness," "Verbal Assertiveness," "Nonverbal Assertiveness" (unless you passed this out in Part Three), "Learning To Say 'No'," "Putting It All Together," and materials from the optional activities you used. Suggest that advocates review these materials at home.

Putting It All Together

We have covered a lot of ground. We talked about the differences between assertiveness, aggressiveness, and passiveness. We talked about why people are aggressive and passive, and why appropriate assertive behavior works better than the other types. We covered assertive skills and how to teach them to your protege.

Learning new skills takes practice and patience. Learning when to use the particular assertive skills takes even more time and practice. Don't be discouraged if you are nervous and awkward at first. You will improve, and your assertiveness will increase.

We would like to offer a word of caution, however. New skills are fun to learn, and you may be tempted to try them out on everyone. Being assertive also means that you are sensitive to other people's feelings. You do not need to go overboard and say "no" to everyone. That's what we mean when we say "appropriately" assertive. Protect your protege's or client's rights when you need to, but don't forget that other people are okay, too.

Finally, we hope that you can see how using assertive skills—especially expressing positive feelings—can be useful in many other aspects of your life in addition to your role as an advocate. You are an important person. The more you realize that, the more you can help your protege or client feel important.

Session Four, Optional Activity 1

Teaching Your Protege To Be Assertive

Purpose

To develop skills in helping another person learn assertiveness

Methods

Trainer's presentation

Role play

Materials

Handout #4h, "Teaching Your Protege To Be Assertive"

Trainer's presentation

How to teach a protege

10 minutes

This activity is particularly important for citizen advocates, whose relationships with developmentally disabled people are personal and who help them learn new skills. They can teach the assertiveness skills they are learning to their proteges. Also, all advocates need to keep in mind the capacity of a disabled person for self-advocacy and to refrain from unnecessarily dominating their proteges.

Remind the group that the goal of all advocacy is self-advocacy and that one of the best things they can do with their proteges is to help them become assertive enough to handle without assistance some of the problems they encounter. Two of the most effective techniques for teaching a retarded person, and people with normal intelligence as well, are modeling and role play.

Pass out handout #4h, "Teaching Your Protege To Be Assertive," and give the group a few minutes to read it.

Role play

Coaching a protege

15 minutes

Have three advocates volunteer to role play an advocate, a protege, and a third party. Begin by having the group decide on the nature of the protege's disability. The person role playing the advocate should then start the role play by assessing the protege's assertiveness skills and then using modeling and role playing as teaching techniques to meet the protege's assertive needs.

For the remainder of the role play, use a situation that the advocates suggest, or the situation described below.

> Your protege lives in a recently opened group home on Walnut Avenue. For several years, a bus route ran along Walnut Avenue, with a bus stop two blocks from the group home. The residents of the group home, including your protege, depend on the bus to transport them to work, to shop in town, and so forth. About a month after the group home opened, the bus route changed; it no longer comes close to the group home. Your protege has made an appointment with Mr. Bass, the director of the mass transit company.

The person role playing the advocate should act as a coach during the interaction between the protege and the third party. He or she should offer suggestions as needed either before or after the protege has initiated an interaction or made a response. In addition to making suggestions about things that could have been done differently, it is important for the coach to offer encouragement and praise. (Keep in mind that the advocate coach might use this kind of role play situation to give the protege practice before encountering real life situations. It would not be appropriate, however, for the advocate to act as a coach during, for example, a real meeting between the protege and the director of a mass transit company.)

As the role play proceeds, the advocates should observe carefully and make notes for later feedback. After the role play is completed, advocates should offer their feedback and discuss what occurred during the role play.

Teaching Your Protege To Be Assertive

Assertive skills are not only useful to you; they also would be useful to your protege. After all, the goal of advocacy is for the protege to become his or her own advocate and to be as independent as possible. Assertive skills will help all individuals, including those with disabilities, to become more independent. Disabled persons may be accustomed to acting passively. It may be harder for them to assert themselves, especially those who cannot control their voice or posture. There are several things you can do to teach your protege to become assertive.

Assessing the situation

First, determine the kinds of social situations your protege is likely to encounter, and assess his or her assertive skills in those situations. Different proteges will face different situations calling for an assertive response; for example, a protege who recently moved from an institution to a group home will probably face different situations than a protege who has always lived at home, and both of these will face different situations than a protege living in an institution. Most proteges will likely face some of the following kinds of circumstances: being called a retard, a dummy, or a cripple; dealing with a parent who continues to treat the adult protege as a child; responding to a pushy salesperson; having a job interview; dealing with an aggressive supervisor or landlord; being asked for money by a stranger; and stating feelings about participating in a sexual act with another person. In order to assess the protege's skills, accompany the protege, if possible, and observe how he or she handles these or other situations. When real-life observation is impossible, role play a situation with your protege to see how he or she would respond.

Modeling and role playing

Once you have determined the protege's assertive abilities and needs, two techniques—modeling and role playing—are particularly useful in teaching assertive skills to disabled persons. In modeling, the advocate demonstrates the appropriate way to handle a particular situation. For example, you could demonstrate appropriate expressions of anger in response to criticism or abuse, showing how to get your message across without losing your temper. In your modeling, use verbal and nonverbal assertive skills. Tell the protege what you are doing and why. Point out the particular behaviors that convey assertive messages, such as message content, eye contact, facial expression, body posture, or voice tone and volume. Mentally handicapped persons often have flattened, indifferent voices and facial expressions, and you may have to work particularly on these areas. Also, empathic assertion is an especially powerful skill for disabled individuals to learn, since it is effective in responding to criticism, name-calling, or comments about personal limitations, a situation which most developmentally disabled persons will encounter at one time or another.

After modeling a few times, encourage the protege to attempt the assertive skills by role playing situations with you. Ignore any inappropriate aggressive or passive responses the protege makes during the role play sessions, and reinforce the protege's suitable assertive behaviors by calling attention to them and praising the protege for them. This approach helps create a positive and success-oriented atmosphere, which will encourage the protege to continue practicing assertive skills both in role-play sessions with you and in real-life activities.

Do not expect your protege to become proficient right away. It usually takes practice over a long time period for anyone to master assertive skills. If you want to work on particular skills, such as voice volume or tone, you can read about recommended teaching techniques and exercises in *Personal Effectiveness: Guiding People To Assert Themselves and Improve Their Social Skills,* by R.P. Liberman, L.W. King, W.J. DeRisi, and W. McCann (Research Press, 1975).

Session Four, Optional Activity 2

Expressing Positive Feelings

Purpose	To develop skills in expressing positive feelings assertively
Methods	Trainer's presentation Group practice Coaching a partner
Materials	Handout #4i, "Expressing Positive Feelings" Pencils and 3 x 5 cards for writing compliments
Trainer's presentation *How to express positive feelings* 10 minutes	Much of the assertiveness training so far has focused on expressing negative feelings—saying "no" or confronting someone when a client's or protege's rights have been violated. Assertiveness also means expressing positive feelings—such as compliments—openly, directly, and comfortably. Using background material, "Expressing Positive Feelings," explain why people are often embarrassed to give and receive compliments and how to express positive feelings comfortably and graciously.
Group practice *Writing compliments** 10 minutes	Have each advocate write on a card a compliment for every other advocate and then sign his or her name on the card. The compliments do not need to be deeply personal but they should be sincere. Distribute the cards to the intended receivers. Then let each advocate say how he or she felt about one of the compliments he or she gave or received. Advocates should speak directly to each other as opposed to talking to the trainer or the group. For example, "John, I especially appreciate your compliment because it is direct and clear."
Coaching a partner *Saying compliments* 10 minutes	Form pairs of players and coaches. Then form groups of two pairs each. Have the players role play an advocate expressing positive feelings toward a protege. Coaches then provide feedback. Members of each pair then reverse roles and repeat the activity.

*NOTE. This exercise was adapted from *Training Volunteer Leaders*, 1974, by the Research and Development Division, National Council of Young Men's Christian Associations (291 Broadway, New York, NY 10007), p. 74, and used by permission.

Expressing Positive Feelings

Many people feel embarrassed when they want to say something positive to someone else. They fear that they will sound silly or will be put down. Actually, nice things feel good to say and to have said to you once you get used to them. After all, people have warm and close feelings in addition to those feelings that we express when we are unhappy about something. These need expression, too. Cultural messages tell us not to give each other compliments and not to take them if they are given to us. However, your protege needs to hear good things in order to increase his or her self-respect. You will be very important to your protege because you can give many of these positive statements; assertive skills will help you express positive feelings directly, openly, and comfortably. You might, for example:

Tell your protege that you like him or her.

Put your arm around your protege.

Say, "Let's go have some fun together."

Smile warmly.

Say, "You're really doing that better today."

Say, "I believe that you can do it."

Let your protege know that you will be thinking about him or her.

Let your protege know that you are there to help.

Give him or her something special.

Unfortunately, disabled people often receive few compliments. But they're like anyone else, and need to hear good things about themselves, too. Thus, giving these compliments or "strokes" will be very important to you and your protege. Certainly you don't want to say things that you don't feel, but when you have a positive feeling it is important to express it. So, if you have difficulty giving compliments, practice it. You might begin by practicing while you are alone, to get accustomed to hearing yourself say the words. Then, try expressing your positive feelings to your protege; chances are good that you'll quickly become comfortable giving compliments after just a little practice.

Many people are uncomfortable when receiving compliments, too. They may feel embarrassed and belittle the praise. Doing this makes the person who gave the compliment feel bad; it implies that he or she was mistaken or insincere. For example, if someone says to you. "That's a nice shirt you're wearing today," and you say, "Oh, it's just an old thing," the person who complimented you will feel bad. It's much better to accept sincere compliments graciously, saying something like, "Thank you, that's nice of you to notice." With a little thought and practice, you can learn to accept compliments graciously and help your protege learn to do so as well.

Session Four

Resources

Adler, R.B. *Confidence in communication: A guide to assertive and social skills.* New York: Holt, Rinehart, & Winston, 1977.

Alberti, R.E., & Emmons, M.L. *Your perfect right.* San Luis Obispo, CA: Impact, 1974.

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Granat, J.P. Assertiveness training and the mentally retarded. *Rehabilitation Counseling Bulletin,* 1978, *22,* 100-107.

Grunz, L. *Assertiveness Training Task Force: Workshop and materials prepared for TASA.* Lawrence: University of Kansas, January 1979.

Lange, A.J., & Jakubowski, P. *Responsible assertive behavior.* Champaign, IL: Research Press, 1976.

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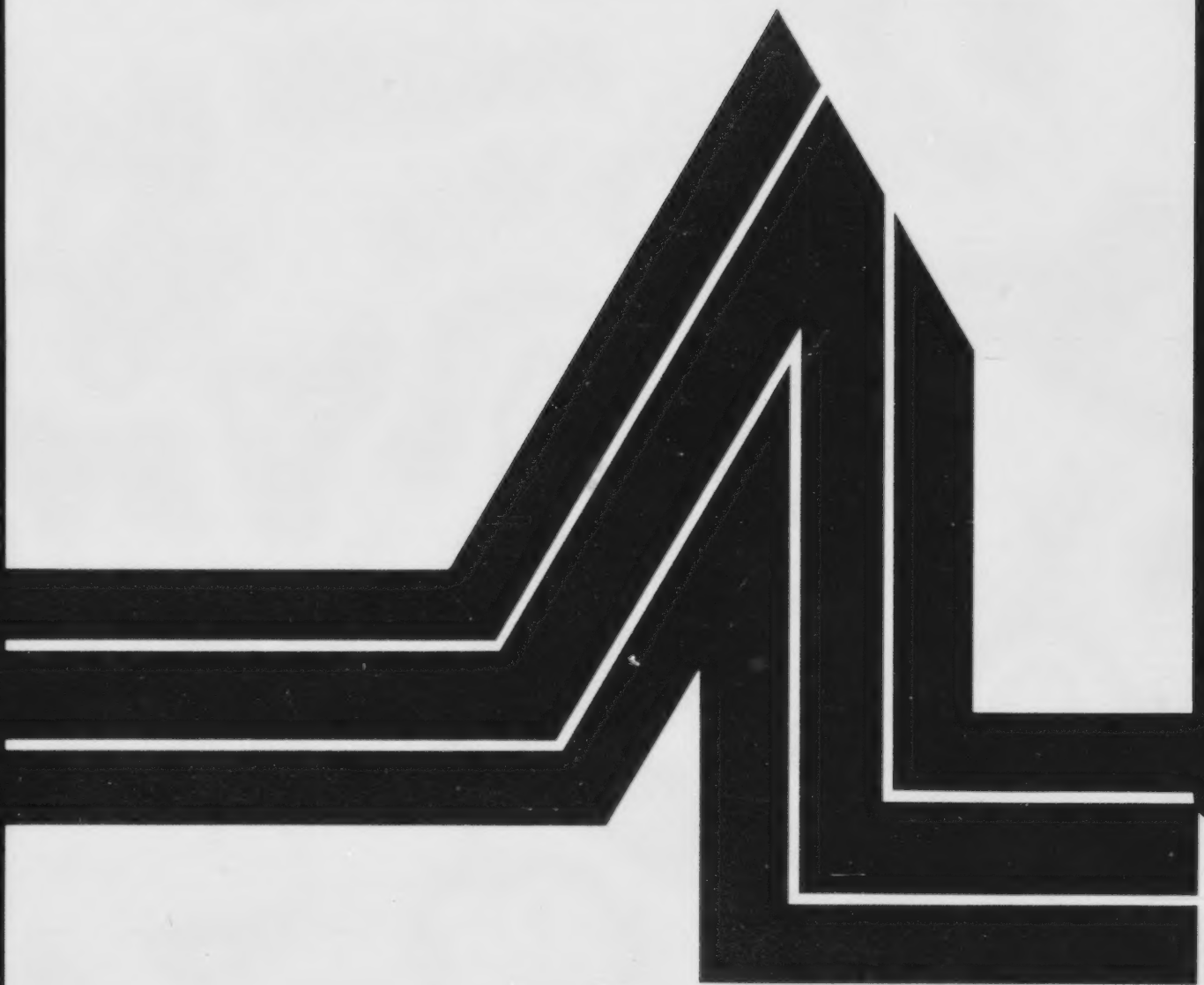
Research and Development Division, National Council of Young Men's Christian Associations. *Training volunteer leaders: A handbook to train volunteers and other leaders of program groups.* New York, NY: National Board of YMCAs, 1974.

Session Five

Taking Action



Session Five

Taking Action

Purposes

To identify community resources

To present a method for determining priorities for taking action

To help advocates develop skills in interviewing, writing letters, making a prepared statement, and negotiating

Rationale

An advocate is in part a problem solver. In order to solve problems, advocates need to know what resources are available, how to select the best method of action, how to get facts, and how to act. Taking action may be as simple as a phone call or as complex as an extended negotiation between two opposing sides. Taking action is doing what needs to be done to achieve one's goals. This session gives advocates skills in several different action techniques.

Topics, methods, and schedule

Part One: Identifying Community Resources

- Warm-up activity (optional) (15 minutes)
- Small group activity: Identifying community resources (30 minutes)
- Or: Individual activity: Identifying community resources (30 minutes)
- Trainer's presentation: Directory of community resources
- Presentation by agency personnel: Descriptions of services (15-30 minutes)

Part Two: Determining Priorities

- Group practice: Determining priorities (30 minutes)

Part Three: Interviewing

- Trainer's presentation and discussion: Interviewing (10 minutes)
- Role play: Interviewing (30 minutes)

Part Four: Writing Letters

- Discussion: Writing Letters (10 minutes)
- Critique: Sample letter (10 minutes)
- Group practice: Writing a letter (20 minutes)

Part Five: Making a Prepared Statement

- Discussion: Making a statement (15 minutes)
- Group practice: Preparing a statement (30 minutes)

Part Six: Negotiating

- Group practice: Peparing to negotiate (30-45 minutes)

Note: After completing parts one and two, groups should pick any of the remaining topics where they feel they need information, or they can complete all of the topics in another meeting.

Materials

Nametags, paper, and pencils for group members

Materials as needed for a warm-up activity

Large charts, each headed by one category of community services, or individual lists of the categories of community services

Felt tip pens

Easels or masking tape

Directory or list of agencies, organizations, and publications in your community providing human services

Handouts

#5a, "Determining Priorities"

#5b, "Determining Priorities" (case study)

#5c, "Interviewing"

#5d, "Interviewing" (case studies)

#5e, "Writing Letters"

#5f, "Writing Letters" (sample letter for critique)

#5g, "Writing a Letter" (case study)

#5h, "Making a Statement Before a Committee, Board, or Governing Body, or at a Public Hearing"

#5i, "Preparing a Statement" (case study)

#5j, "Negotiation"

#5k, "Strategies of Negotiation"

#5l, "Negotiation: Case Study"

#5m, "Negotiation: Worksheets"

Preparations

Prepare nametags and any necessary materials for the warm-up activity.

Prepare charts with categories of community services. List one category per chart.

Select the parts of the lesson plan for parts 3, 4, 5, and 6 which you intend to use. Make copies of the handouts for the group members. If you will cover "Negotiating," prepare a case study.

Optional. Invite personnel from agencies with which the advocacy program works to describe their services.

Optional. Identify cases advocates are currently working on that can be used as case studies for the exercises on determining priorities, interviewing, writing letters, making a prepared statement.

Session Five, Part One

Identifying Community Resources

Purposes

To identify services in the community in health, education, welfare, recreation, and religion

To show advocates how much they already know about available services and thereby to see themselves as good resources

Methods

Small group or individual activities

Optional. Presentations by agency personnel

Materials

Large charts, each headed by one category of community services (listed below)

Or: Individual lists of the categories of community services with space for participants to fill in specific services

Felt tip pens

Pencils

Easels or masking tape

Directory or list of agencies, organizations, and publications in your community providing human services (to be obtained or prepared by the advocacy program)

Warm-up

15 minutes

If group members do not know each other well or if they have not recently met together, do one of the warm-up activities described in "Tips for Trainers."

Small group activity

Identifying community resources

30 minutes

(option 1)

Before the session, print the categories of community services listed below on large, chart-size paper, one category per chart. You may use any or all of the following categories, or add your own.

- children's services
- clinics
- continuing education
- counseling and guidance
- education for handicapped people
- employment
- family services
- financial services
- health services
- legal services
- recreation
- vocational guidance

Place the charts on easels or tables in the meeting room, or tape the charts to the walls.

When the group has gathered, proceed with the activity following directions for either a or b.

(a) Divide the whole group into small groups of three or four. Give each group a felt tip pen and assign each group to a chart. Give the groups 2 minutes to write on the chart agencies, organizations, and publications in the community which provide services within the category on the chart heading. After 2 minutes, the groups move to another chart; then after 2 minutes more they move to a third chart, and so on for about 15 minutes. Explain that the groups do not need to limit their lists to those organizations serving handicapped people. If you use many charts, let the group understand that everyone will not work on every chart. Or, you can put up just enough charts to allow each group to get around to each chart.

(b) As an alternative to the above procedure, divide the groups into pairs. Have each pair walk from chart to chart and write down community services which fit into the category on the chart heading. Pairs do not have to work in any particular order, and they can come back to a chart if they think of something after they have passed it. They do not have to work at every chart, only those where they have something to write down. Allow about 15 minutes.

When the small groups or pairs have finished their lists, call the whole group together to review the lists they have made. Go over one list at a time and discuss what is on it. For example, under *employment,* the list may read: *state employment commission, newspaper want ads, municipal employment agency, personnel offices at area colleges.* The whole group may be able to think of other services. If you know of some that have been left out, you might name them. If, in spite of your instructions, group members have overlooked some agencies not associated with handicaps, ask: "Why didn't we think of these?" "Would we use such resources ourselves?" "Could they serve developmentally disabled people as well?"

Individual activity

Identifying community resources

30 minutes

Instead of having small groups or pairs work together to identify community resources, you may have individuals work alone, writing down their lists of resources on pieces of paper. This alternative is feasible especially if you cannot provide a directory of community services. Group members can keep their own lists as the start of such a directory.

(option 2)

Write the categories of community services listed in option 1 above on pieces of paper. List all the categories on each sheet and include space for participants to fill in specific agencies, organizations, and publications for each category. Pass out sheets to all participants and ask them to fill in the spaces.

After about 15 minutes, discuss as a group the individual lists, one category at a time, according to the directions for group discussion at the conclusion of the option 1 activity.

Handout

Directory of community resources

5 minutes

If your city has a directory of community services, you may want to get copies for the advocates. Check with your United Way or similar group. Sometimes umbrella groups will have lists of services within their speciality. For example, the March of Dimes may have a list of all the agencies in the area which deal with birth defects. Find the most comprehensive list available or combine several lists.

If you keep a file of agencies and organizations with this information plus names of contact people, descriptions of people served, and fee schedules, let the group know that you have this resource available.

Presentations by agency personnel

Descriptions of services

15-30 minutes

(optional)

Invite two or three people from different agencies with which advocates often work to talk to the group about how the agencies work, whom they serve, and how they can help developmentally disabled people.

In addition to giving useful information to advocates, this activity may make cooperation from the agencies more likely.

Session Five, Part Two

Determining Priorities

Purpose	To give advocates a method of determining the best action technique for a given problem
Method	Group practice
Materials	Handout #5a, "Determining Priorities" (worksheet) Handout #5b, "Determining Priorities" (case study, optional) Pencils

Group practice

Determining priorities

30 minutes

For this activity, you may use the case study (handout #5b). Or use this training time as a work session and use a case that an advocate is preparing to work on. You may select this case in advance of the training session to save time at the session. You may use different cases for every six advocates in training.

Distribute copies of handout #5a, "Determining Priorities" (worksheet). If the whole group will work on the case study on handout #5b, distribute copies of that as well. Or if the group will work on an advocate's case, let the advocate present the details now.

Instruct the advocates to write down under item A on the worksheet the steps they might take to solve the problem presented. Tell them to list as many steps as they can think of; they need not think of six nor are they limited to that number. At this point, the goal of the activity is for individuals to think of the options for action rather than to select the best options. Possible action techniques for the case study included here are: interview the head librarian, research the applicable law, interview the city manager, talk to an attorney, file a lawsuit.

After 5-7 minutes, divide the advocates into groups of three and instruct them to share their lists with the other members of their small group. The small groups should discuss the pros and cons of the options they have written individually. Then, as a group, they should pick the four options for action that would work best and list them on the worksheet in the order they would do them.

After 10 minutes, combine each group of three with another group of three. The groups of six, synthesizing their lists, should list the three best options for taking action, in the order that they would do them.

After 5-7 minutes, have the groups report their three steps to the whole group.

Conclude by noting that this method of determining priorities forces groups to act thoughtfully, not hastily, and to consider *all* the possibilities for action and the consequences of each. Thus, it is a good first step whenever an advocate needs to take action.

The method also allows all members of a group to contribute ideas. If an advocate is acting individually on a case, he or she can still invite one or more advocates to help determine priorities using this method.

Determining Priorities

A . List the possible actions you could take to resolve the problem at hand.

1. _____
2. _____
3. _____
4. _____
5. _____
6. _____

B . Combine your list with the lists two other people have made and decide together which actions would work best. List four actions in the order you would take them.

1. _____
2. _____
3. _____
4. _____

C. The three of you combine your list with the list another group of three has made. Determine together the three action techniques that would be most likely to work and the order in which you would take them.

1. _____
2. _____
3. _____

Case study

Abigail has cerebral palsy and epilepsy. She has a severe speech impediment and takes medication to control her seizures. Abigail applies for a position as assistant librarian with the municipal library, which receives federal funds. The position involves shelving, indexing, and related clerical duties. Abigail is qualified for the position. Under the library's personnel rules, all applicants must fill in a health history form and have a job interview. Abigail fails the interview because the head librarian cannot understand her. The health history form says: "State whether you are subject to any psychiatric or nervous disorders, heart disease, neurological disorder, or if you are allergic to dust."

Session Five, Part Three

Interviewing

Purpose	To give advocates information on and practice in interviewing for gathering facts
Methods	Trainer's presentation and discussion Role play
Materials	Handout #5c, "Interviewing" Handout #5d, "Interviewing" (case studies, optional)

Trainer's presentation and discussion

Distribute copies of handout #5c, "Interviewing." Review the tips about interviewing given in this background material. Stress that this information is about fact-finding interviews, not about an interview to attempt to change or influence another person.

"Interviewing" #5c

10 minutes

To give advocates practice in identifying and using different kinds of questions, you may read the following questions one at a time and ask the advocates to identify them as open or closed.

> Do you have any problems with people cheating on exams? (closed)
>
> Is there a policy for working overtime? (closed)
>
> Tell me about the response you got from the questionnaire. (open)
>
> What ways would you suggest to improve the personnel policies? (open)
>
> Did you have time to work on the report? (closed)
>
> What are your thoughts about normalization of handicapped persons? (open)

Some of the questions on the following list are leading questions. Ask advocates to identify the leading questions and to rephrase them so that they are not leading.

> Do you believe that we should spend such an exorbitant amount of money on programs for the handicapped? (leading)
>
> Do you think it is unreasonable to want good facilities at the state school? (leading)
>
> What are some ideas you have about educating autistic children?

Do you have an adequate personnel policy? (leading)

Do you believe that schools should be forced to mainstream all handicapped youngsters? (leading)

Do you have a policy concerning overtime work?

Role play

Interviewing

30 minutes

Divide the advocates into groups of three or four people, forming an even number of groups.

Have an equal number of groups work on case study 1 and case study 2 (handout #5d). Or use cases advocates are working on.

Using the techniques for interviewing presented in the background material, groups will plan how to find the facts that are needed. Groups should indicate whom they would interview, how they would set up the interview, and questions they would ask.

After the groups have completed their lists of questions in about 15 minutes, have one member role play the interview with a member of a group that worked on the other case study. Brief the person playing the interviewee on the facts of the case.

Do at least one role play for each case study. Advocates not playing parts can observe and comment.

Interviewing

An essential component of any action technique is getting the facts. One way of getting the facts is to ask questions of the people who know them.

Think of the interview as preceding the action you will take to accomplish your goals. During the interview you are not trying to bring about a change or to persuade; your purpose is just to find facts. If a person interviewed senses that you are lobbying rather than interviewing, he or she may not speak openly. After you get the facts, there will be time to take action to bring about change.

If you really want to get information, you need to come to the interview with an open mind. Chances are you have an idea about what the facts are, and you are interviewing in part to confirm your ideas. But if you are too biased, you may overlook important information. The person you are interviewing will soon sense your biases and may become distrustful.

Preparing for an interview

The first step in preparing for an interview is to determine exactly what you want to know. You can use as your guideline the basic questions journalists try to answer when reporting a story: who, what, where, when, why, and how? Knowing your goals for the interview will help you select the appropriate person to talk to.

Usually the best person to interview is the person closest to the problem who has some authority to act. For example, if the problem is administrative, try to set up an interview with an administrator, but if the problem has to do with interpersonal relationships, talk first to the person who is involved. If you don't get enough information from the first person you talk with, you can interview someone else, but you will save time by talking first to the person most likely to have the information.

Telephone for an appointment for the interview. Indicate how much time you will need and the general purpose of the interview.

Prepare a list of questions that you want to ask. Construct the questions so that the responses will give you the information you want to know. Take the list of questions with you to the interview. You don't need to be so tied to your list that you fail to follow up on an interesting comment as you look for your next question, but your list will help you remember all the points you want to cover.

Asking questions

The way you phrase your questions makes a lot of difference in how a person responds. *Open-ended questions* allow the person being interviewed to volunteer information. They cannot be answered with a "yes" or "no" or a brief statement. Thus, they yield more information than questions that can be answered with one or two words. An example of an open-ended question is, "Tell me about your procedures for evaluating a client's interpersonal skills."

You can set a good tone for the interview by beginning with an open-ended question that the person interviewed can respond to favorably. For example, you might begin with, "I've noticed that some of the residents here have begun a small engine repair service. What kind of training program do you have for them?"

When you ask open-ended questions, you will encourage the person to continue talking. Also, show that you are interested in hearing more by using *probes* such as, "Go on," "Tell me more," or "I see."

A disadvantage of open-ended questions is that they allow the person responding to get off the subject or to spend more time with an answer than you have. If that happens, you can interrupt with a *closed question* that can be answered with "yes" or "no."

Leading questions indicate the answer you want. They lead or direct the person to tell you what you expect to hear. For example, "Do you really think it is fair to deny this little boy an education just because he has mental retardation?" directs the person answering to comment on the lack of fairness. The question, "What do you think would be the best school placement for this boy?" lets the person choose the theme of the response and therefore gives you more information about the person's thoughts.

Don't ask antagonistic questions. Remember that the purpose of your meeting is to get facts, not to persuade. If you are insulting or critical, the person you are interviewing will become defensive and won't give you the facts you need.

When you ask a question, listen attentively to the answer. Follow up on points and be sure you understand what has been said. Jot down notes, but don't write down everything. Don't become so caught up in note taking or in thinking of your next question that you are not listening well.

Dealing with evasive people

Sometimes people regard advocates with suspicion or resentment and they resist sharing anything but the most general facts. If a person gives you an evasive answer, you can probe for more information by repeating or rephrasing your question or by asking another, more specific question. You may have to ask a directive question to get the person to commit. For example, you might comment, "I take it then that you are saying . . ." or, "You intend to . . ." or, "Do I have this right . . .?" The person interviewed has to say "yes" or "no" to such a comment and thereby clarify the evasive answer. Don't hesitate to challenge an answer.

Some people will cite laws protecting the privacy of individuals. You can deal with such a response best if you know in advance of the interview what the laws are and what information you are entitled to have. In some circumstances, you may have to convince the person that you can be trusted to maintain a confidence and that your interest is in the welfare of your client or protege rather than in harming an agency or person.

Courtesies

The impression you make as a person will affect how cooperative the person you interview is. Both for the sake of common courtesy and for the sake of developing allies, arrive on time for the interview, introduce yourself and explain why you have come, do not stay beyond the time allotted you for your appointment, and thank the interviewee for his or her time when you conclude the interview.

Conclusion

Immediately following the interview write down what happened, what was said, and your impressions of the interview. This record that you make will help you remember important points.

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Case study 1

Jason works in a shop which has a contract with the Department of Education to produce experimental educational equipment. The shop has a health and accident insurance plan through the Purple Heart Insurance Company. The company will not include Jason in the group plan because he has epilepsy. Consequently, Jason has no coverage. You are Jason's advocate. You have agreed to help him.

Case study 2

You became advocate one month ago for Jill, a severely retarded 30-year-old female. You have visited Jill five times at the state institution where she lives. Four out of the five times, her arms have been strapped to her wheelchair. She usually also smells of urine, and even though the advocacy program coordinator told you that she had toileting skills, the odor and tied arms have led you to suspect that she does not have the freedom to use her skills, nor is she encouraged to do so.

The first three times you visited with Jill, she seemed hardly aware of your presence. Now she seems to recognize you, but she either doesn't understand your questions about her tied arms or is unable to explain, so she hasn't given you any information about possible problems.

You want to know whether Jill is almost always tied and why. You also wonder if she is being allowed to regress in toileting.

Session Five, Part Four

Writing Letters

Purpose	To help advocates develop skills in writing informative and persuasive letters to administrators and public officials
Methods	Discussion Critique Group practice
Materials	Handout #5e, "Writing Letters" Handout #5f, "Writing Letters" (sample letter for critique) Handout #5g, "Writing a letter" (case study, optional) Pencils and paper for group members
Discussion *"Writing Letters"* #5e 10 minutes	Distribute copies of handout #5e, "Writing Letters." Discuss the tips on the handout with the group. Give examples from the experience of your advocacy program when writing a letter was an effective action technique. If you have copies of especially effective letters that have been written by advocates or staff members, read some to give group members a concrete idea of how, when, and why a letter might be used. Two reasons are: to reach a person to whom one does not have access personally or by phone, because of the person's location or position; to have a permanent record of interactions.
Critique *Sample letter* #5f 10 minutes	Distribute handout #5f, the sample letter for critique. Ask the group to find the things that are wrong with the letter. Group members can call out mistakes as they identify them. Encourage them to suggest ways of correcting the mistakes by asking, "What might the writer have said instead?" Advocates may want to note errors in the space above them. Also discuss the overall impression that the letter makes. Some of the specific mistakes are: incorrect salutation, apology, no identification of the legislation by name or number, lack of courtesy and respect, wordiness, lack of facts to support the opinion, and writing about two separate subjects.

Group practice

Writing a letter

20 minutes

Divide the advocates into groups of three to four people. Give each group the case study in handout #5g; or share the facts of a situation one of the advocates is dealing with at present or the facts of a situation your program has dealt with in the past. Or ask the groups to define a situation of interest to them. Then have each group write a letter to someone involved in the situation they are using.

Writing Letters

1. Make your letters short and confine each letter to one subject.
2. Unless you have new facts to present, don't write more than once on the same subject.
3. Try to be constructive and positive. Let the person to whom you are writing know that you are interested in his or her views on the issue.
4. Personalize your letters; form letters or chain letters are not persuasive.
5. Use your own words and your own stationery.
6. Write legibly. Handwritten letters are fine if they can be read, and typewritten letters are okay, too.
7. Time your letter so that it arrives while the issue is alive and being acted upon.
8. If writing about a bill, be sure to include the popular name of the bill and, if possible, the bill number.
9. When writing to public officials be sure to use the correct salutation and address. Some examples are listed below:

   The Honorable _____
   United States Senate
   Washington, DC 20510
   Dear Senator _____,
   Sincerely yours,

   Superintendent _____
   Centerville Public Schools
   Centerville, ME
   Dear Mr. (or Ms.) _____,
   Sincerely yours,

   The Honorable _____
   The House of Representatives
   Austin, TX 79711
   Dear Mr. (or Ms.) _____,
   Sincerely yours,

   Councilwoman Jane _____
   Anytown City Hall
   Anytown, CA 75120
   Dear Councilwoman _____,
   or Dear Ms. _____,
   Sincerely yours,

   Correct salutations and forms of address also appear in many dictionaries.
10. Be courteous and reasonable. Avoid being rude or threatening.
11. Avoid being self-righteous or beginning a letter with phrases such as "As a citizen and a taxpayer . . . ."
12. Public officials are there to serve you, so do not apologize for taking their time. If you are brief and to the point, they will be glad to hear from you.
13. Write letters of commendation when an official has done something of which you particularly approve.

Lists of elected officials in your community or state are usually available from the office of your local League of Women Voters. Most Leagues publish a list of officials, from the President of the United States to local officials, and include proper forms of address for all.

NOTE. Adapted from *Tell It to Washington*, Publication #349, Copyright © by the League of Women Voters Education Fund (1730 M Street, NW, Washington, DC 20036), and used by permission.

January 10, 1979
2423 Avenue A
Anytown, CA 91521

Senator John Smith
United States Senate
Washington, DC 20510

Dear Mr. Smith:

I know you are very busy and you probably don't have time to read this, but I think it is important that you know how I feel about the legislation which concerns the expansion of the definition of developmental disabilities. In case you don't know it, the legislation as now proposed would have a devastating effect upon people with developmental disabilities. Of course, many people would argue just the opposite, but that is because they are misinformed. I hope you are not one of these people. I have known too many people who can't seem to understand what people in this field are trying to do. It is really too bad because so much good talent is wasted.

As long as I am writing I might just as well let you know that I certainly don't approve of your stand on the agriculture bill. It is not helpful to people in our area and I can't for the life of me figure out why you would take the position you have.

Thank you for your attention to the above matters.

Sincerely,

John Doe

Case study

You are the advocate for Luisa, a 20-year-old mildly retarded woman who lives in her own apartment with a roommate. She is becoming increasingly independent and well-informed, partly through taking courses at the state university located in your community. The courses are designed specifically for people with retardation. She has taken courses in legal and civil rights of handicapped people, money management, and family planning.

Because of the governor's budget cuts, the university has decided to drop this special program for retarded persons. Luisa is disappointed and angry. She has talked to her instructor, who is sympathetic but who says he has no power to keep the program alive.

You feel that the community as a whole benefits as much from educating its citizens with mental retardation as it does from educating people with average and above average intelligence. You also know how much Luisa has gained from the program. You have decided to write your state legislator, who is also a member of the legislative budget board, to express your point of view.

Session Five, Part Five

Making a Prepared Statement

Purpose

To develop the advocates' ability to prepare a statement to be made at a public hearing or before a group of elected officials

Methods

Discussion of tips on making a statement (background material)

Case study

Materials

Handout #5h, "Making a Statement Before a Committee, Board, or Governing Body, or at a Public Hearing"

Handout #5i, "Preparing a Statement" (case study, optional) (or prepare your own based on an actual experience of your advocacy program)

Pencils and paper for group members

Discussion

"Making a Statement"
#5h

15 minutes

Distribute copies of the background material, "Making a Statement Before a Committee, Board, or Governing Body, or at a Public Hearing" (#5h).

Discuss with the group the points covered on the handout.

Give examples from the experience of your advocacy program when making a prepared statement was an effective advocacy technique.

Group practice

Preparing a statement

30 minutes

Divide the advocates into groups of three or four people. Distribute copies of the case study (handout #5i) or distribute copies of a case study that you have prepared.

Ask the groups to prepare a plan for making a statement to the city council and also to write the statement, using the tips in the background material.

The plan should include strategies for fact-finding, getting on the agenda, and for involving other citizens in the community. The plan should also specify who will do the speaking and the other tasks as well as deadlines for completing the tasks.

The groups may write on the case study sheets so that they will have their notes for reference.

After the groups have completed their work, have them share their ideas and read their statements to the rest of the group.

Making a Statement Before a Committee, Board, or Governing Body, or at a Public Hearing

Making a statement, or testifying before a group, is a good way to get your opinions before a large audience. Sometimes boards or public bodies hold formal public hearings, inviting citizens to speak on given topics. It is also possible to ask to appear before a group and make a statement. For example, you might want to speak to your school board about a problem which you feel it should consider. Either way you need to prepare carefully.

How to prepare a statement

1. Think about what you want to say and outline your main points.
2. Write out what you plan to say. Usually you will read from your prepared statement at the hearing.
3. Start your statement by giving your name, address, occupation, and whom you represent. For example: "I am Jane Jones. I live at 4321 Elm Street. I am the director of City School for handicapped adults. Thank you for the opportunity to appear before you today to tell you about . . . ."
4. Practice reading aloud what you have written. Say it in your own words. Even though you might think someone else's prose is fancier, you will be more comfortable when you are speaking if you use your own words.
5. Prepare for questions. Think of things that you might be asked and formulate answers. Do any necessary research so you can respond with facts, not generalizations.
6. Try out the statement on a friend, family member, or colleague. Let them critique you and ask you questions.
7. Be as brief and succinct as possible. Usually you will be given a time limit. Time your statement so that you stay within the time allotted you.
8. Prepare enough copies of your testimony for each member of the board, and prepare copies to distribute to representatives of the news media if they are present.

What to do before the meeting

Call the agency that is holding the meeting to find out the ground rules for making a statement. Some hearings are structured so that they hear first from the pro side and then the con side. Others take people in the order that they call in or sign in at the hearing. Find out the time constraints, the number of people on the hearing board, and whether they will accept written testimony as well.

If you are not testifying at a regularly scheduled hearing but have asked for time on the agenda to speak to the agency or board, find out the procedure for getting on the agenda. Because open meeting laws require that agendas be posted several days in advance of the meeting, call as early before the meeting as possible to assure that you will get time on the agenda.

Speaking for a group

Take along members from your group to sit in the audience and lend moral support. If you can work it into your testimony, ask them to stand to show that you are speaking on behalf of a number of people. Or have each one of them wear a single identifying thing such as a paper flower or a name tag of the same color and design. Sometimes people decide to carry signs. Check ahead of time to see if signs will be permitted in the meeting room.

The purpose of a public hearing is to take testimony. Most boards and agencies will act on the testimony later. Make the people with you aware of this so that they will not expect an immediate decision and be disappointed.

Case study

For several years you have worked closely with Jana, who is in a wheelchair. You have become very conscious of how hard it is to get around easily in public buildings. You know that the law in your state requires that where state and local public funds are involved, buildings must be accessible to all people.

Jana has a chance to take a job in the municipal building on the third floor, but she has discovered that while the elevator can accommodate the wheelchair, there are no ramps in the building, and only one bathroom, located on the first floor, is equipped for wheelchair users.

You have agreed to help Jana. You have decided to go to the City Council with your request for help.

Session Five, Part Six

Negotiating

Purposes

To practice the planning that precedes negotiation

To identify strategies of negotiation

Method

Group practice, using worksheets and example

Materials

Handout #5j, "Negotiation"

Handout #5k, "Strategies of Negotiation"

Handout #5l, "Negotiation: Case Study" (8 pages)

Case studies (to be provided by advocates or the advocacy program)

Handout #5m, "Negotiation: Worksheets" (7 pages)

Group practice

Preparing to negotiate

30-45 minutes

In addition to letting advocates practice the planning that precedes negotiation, this exercise can be used to prepare advocates to negotiate real cases. Ideally, they will provide the case studies from their own experience and use this training time as a work session. Or you can provide case studies based on past experiences of the advocacy program.

Distribute copies of handouts #5j, #5k, #5l, and #5m, the background, example, and worksheets.

Explain that this method of planning to negotiate can be used both for complex and formal negotiations, where both sides use teams of negotiators, or for simple negotiations involving individuals. Negotiating at any level is more likely to succeed if the negotiators have planned and are prepared.

Divide the advocates into small groups of three or four. Each small group can work on a different case study.

Using the example in handout #5l as a reference and guide, and writing on the worksheets, the groups will prepare their own plans for negotiating the case they are working on. Your role as a trainer is to float among groups, giving advice, assistance, and praise as appropriate. Also try to keep the groups working at approximately the same rate.

Refer the groups to the tips on asking questions from Part Three, Interviewing, as they prepare strategies and agendas.

When the small groups have completed their plans, have each group briefly describe its case and negotiation plan to the whole group.

Wrap up the entire session by using "I learned" statements or by asking for questions and comments.

Negotiation

Negotiation means to settle a matter through conference or discussion.

Whenever people exchange ideas with the intention of changing relationships or whenever they confer in order to reach agreement, they are negotiating.

Negotiation can be complex and formal and involve large amounts of money. It can also be informal, simple, and involve no money.

Careful analysis and planning are essential to the negotiation process. They help a negotiator develop a sound strategy; they also help a negotiator anticipate and solve problems before the problems become traps.

Strategies of Negotiation

A strategy is a plan of action. It specifies the methods you will use to get your opponent to agree to the changes you have proposed. If your strategy or plan of action is detailed and thorough, you will be more likely to control the negotiations rather than being controlled by your opponent.

A good way to begin planning a strategy is to brainstorm with your group or with other advocates who understand the situation. In addition to identifying methods of action that may work for you, try to anticipate your opponent's strategies and prepare your responses.

Your strategy will vary with each case in method and complexity. It may include:

names of negotiators and expert witnesses

research to get necessary facts about the situation, effects of the proposed changes, and laws

agenda specifying the discussion topics

rules for negotiating teams

date, time, and place of negotiation

questions you will ask opponents

responses to questions you anticipate your opponent will ask

concessions and threats you are prepared to make

assistance you will offer

deadlines for completing tasks that precede the negotiation

schedule specifying the order in which you will undertake difficult activities

Brainstorm with your group to determine what you need to include in your strategy.

Negotiators

Select negotiators with status similar to the status of your opponent's negotiators. Just as the military doesn't send privates to negotiate with generals, you shouldn't send inexperienced, low-ranking people to face top-level people with the opposition.

Place

Generally home territory is the best place to conduct negotiations. Neutral territory is next best. Negotiating on the opponent's home territory is least acceptable.

When negotiations are conducted on home territory, avoid interruptions from phone calls and office personnel. Try to make everyone as comfortable as possible. People are usually more comfortable negotiating at a table because it is easier to keep track of pencils, papers, ashtrays, and coffee cups. Tactics such as negotiating in uncomfortable rooms that are too hot or too cold or where sun shines in people's eyes are sometimes tried with the hope that uncomfortable people will reach a settlement sooner. These tactics can backfire, causing the opponents to harden their position or your own team to yield from discomfort.

When at the negotiating table, don't try to divide a negotiating team and don't allow your team to be divided. Allow each team to sit together. There is no reason to make it difficult for people from the same team to confer.

Agenda

Even simple and informal negotiations should have an agenda. The agenda, or plan for discussion, controls what happens in the negotiation, when it happens, what is said, and what is not said.

When preparing the agenda, consider where and how issues will be introduced. It is usually a good idea to put easy problems at the beginning because they can be solved quickly, which gives the parties the feeling that things are moving along well. Schedule issues in a way to allow your team time to think. For example, schedule a coffee break in the midst of a difficult or important issue.

Take the agenda to the negotiation with you. Items on the agenda are the first things to be negotiated. If your opponent prepares an agenda, be prepared to negotiate it. Look at it carefully. Think through each step and try to anticipate the consequences of each. Look for omissions as well as for subjects included.

Rules

Rules, along with the agenda, are one of the first things to be negotiated. For uncomplicated negotiations, try to keep the rules as simple as possible. Things about which negotiators make rules include: who may speak and when, who may ask questions, who can bring in outside experts and at what point, when to eat, when to caucus, and when to have rest periods.

Making decisions

Never negotiate a point until you understand it completely. Ask questions to make sure you understand. If you think you do not have adequate information, ask for a recess and take the time to find the necessary information.

Don't assume anything. For example, don't assume that the opponents have thought through their decisions and considered all the alternatives. Try to identify hidden assumptions (both your own and your opponent's) and test them to see if they are true.

Avoid making decisions when you and your team members are tired. Fatigue can result in bad decisions. Decisions may be postponed overnight to give parties time to think and rest.

Don't make a decision just because of an impending deadline. Usually hasty decisions are not good decisions. Deadlines are a pressure tactic, and they work well if people fall into the trap. Deadlines can usually be extended.

Deadlines are good and necessary because they force people to finish things, but don't accept them if you will be giving away too much in order to meet the deadline. Remember that the other side has time limits, too, and be alert to know how the limits will affect their negotiations.

Techniques of opposition

Your opponents will use certain techniques to persuade you that it is impossible for them to do what you want. Learn to recognize their tactics so that you can prevent their success.

outright problem denial
"There really isn't any problem."
"There is nothing wrong with the way things are."

stalling and blocking
"Let's make a needs assessment."
"Why don't you let us look into it further?"
"Let's appoint a committee."

viewing problem as unsolvable
"It costs too much."
"This is only one of many problems. We need to establish priorities."

declaring lack of power
"That's not my job."
"We don't have enough help."
"The staff will never buy it."
"We don't have enough time."
"It sounds beautiful, but . . ."

belittling the problem-solving approach
"We've never done it before."
"I don't see the connection to the problem."

recourse to self-serving action
"Give us the money and we will do it."

Negotiation: Case study

You have been working as an advocate for a person with mental retardation. As a result of your contact with other advocates, you have discovered that the publicly-owned institution where the people live has a program of working residents in lieu of paid staff.

The residents clean, do laundry and kitchen work, wait tables, prepare food, do maintenance and housekeeping, and care for other residents. In exchange for this labor, the residents are given open-ward privileges or other symbolic rewards, but they are not paid the prevailing wage for such work in the community.

Working residents are denied work-related benefits such as worker's compensation and retirement plans. They are also denied the therapeutic benefits of appropriate monetary rewards. They perceive themselves as being exploited and enslaved. They lack the self-respect that comes in part from perceiving oneself as valuable to others.

You believe that aside from exploitation, nonremunerated work has been allowed because of the difficulty of distinguishing work which primarily benefits the institution from work which benefits the residents.

You and the other advocates have formed a group of concerned people and have decided to do something to stop the working residents program as it now exists in this institution.

Negotiation

Step 1 Analyze the problem and specify desirable changes.

To analyze the problem, first, write a rough narrative description of the problem. Then synthesize it into a one-paragraph description of the problem.

Next, analyze the causes of the problem.

Finally, specify the changes that need to be made.

A. Write a rough narrative description of the problem.

Residents in the institution are being exploited because they have to do cleaning, laundry, and maintenance work for the institution. Instead of being paid with money they are given privileges or other symbolic work. This is bad for them for several reasons.

(1) they get no money

(2) they get no worker's benefits

(3) they feel exploited

(4) they feel unrespected and unworthy

(5) the program makes them different from people who work for pay; it therefore interferes with their normalization.

Institution staff argue that their work program is justified on the basis that the work residents perform is part of their written habilitation plan and that the skills they learn will be needed in less restrictive residential programs.

B. Write a one paragraph description of the problem.

Residents of the institution work for the institution without pay, doing such things as food preparation, laundry, and maintenance. Because the residents do not receive payment for their work, they feel exploited and unrespected. In contrast, institution staff claim that the work is an important part of the residents' habilitation program, and therefore the residents should not expect to be compensated for their work.

C. Analyze the causes of the problem.

(1) Difficulty of distinguishing work that benefits the institution from work that benefits the residents

(2) Advantage to the administration of getting work done at no cost

(3) Paying residents would require increased bookkeeping

(4) Paying residents would substantially increase the cost of maintenance

(5) Residents may not have sufficient training to handle their own money

D. Specify the changes that need to be made.

(1) Residents should be paid in accordance with Department of Labor standards for the type of work they are doing

(2) Residents should receive benefits which would be accorded to anyone employed by the institution, including worker's compensation and retirement benefits

(3) Money management skills training should be started for all residents

(4) If the administration fails to accept the above recommendations, the habilitation program should be modified so that residents are not required to perform the same duties as paid staff

Negotiation

Step 2 Identify the person who needs to respond.

To identify the person who needs to respond, look for the source of power closest to the problem.

Determine the specific person in any office you contact who has authority to deal.

Identify the person who needs to respond.

Negotiations should be initiated with the Director of Residential Programming as this person will be in charge of all the resident training programs. If you choose to "go over" the Director and contact the Superintendent first, you may be told to go back and talk to the person in charge of programs.

Negotiation

Step 3 Analyze your strengths and weaknesses and your opponent's.

Strengths and weaknesses relate to:

1. knowledge
2. organization
3. money
4. time
5. law (case law, statutory law, regulations)
6. popular support
7. influential support (news media, elected officials)
8. risks and rewards (who has less to lose and most to gain)

A. Identify your opponent's strengths and weaknesses.

strengths	weaknesses
(1) knowledge of how the institution works	(1) possible violation of the law
(2) some influential support	(2) lack community support
(3) good legal staff and organization	
(4) time... can drag negotiations forever	

B. Identify your strengths and weaknesses.

strengths	weaknesses
(1) law may be on our side	(1) lack money
(2) media will support	(2) may not have the time to invest in legal suit
(3) can get help from the state P&A agency	
(4) well organized citizen group	

Negotiation

Step 4 Identify the reasons for the adversary's opposition.

Here are some reasons why your adversary may oppose you:

1. doesn't see any problem
2. doesn't want to change
3. disagrees with what needs to be changed
4. is satisfied with things the way they are
5. is worried about losing what is already good
6. feels threatened by change of any sort—not flexible
7. feels threatened by involvement of others—particularly those who are consumers and who speak a different language
8. fears censure from friends, co-workers
9. is overwhelmed by the problem
10. is committed to long-established habits and procedures
11. feels the cost is too great

Note here the reasons why you think your adversary is opposed to your proposals.

The opposition says:	The reasons are:
(1) They are helping the residents and the residents are satisfied with symbolic rewards.	(1) don't see the problem, satisfied with the way things are, disagree with what needs to be changed
(2) Outsiders can't possibly know how to run an institution.	(2) feel threatened by involvement of others
(3) The program has worked well since the institution was established.	(3) committed to old ways
(4) It is too expensive to start paying everyone.	(4) cost of modifying the program is too great
(5) The work that the residents are doing is part of their habilitation plans and residents should not be paid for their time while in training.	(5) is satisfied with the way things are

Negotiation

Step 5 Plan strategy.

Your strategy is your plan for action. It specifies the methods you will use to get your opponent to agree to the changes you have proposed. Such methods may include researching facts; calling expert witnesses; preparing an agenda, rules, and questions; selecting negotiators; determining concessions and threats; establishing a favorable date, time, and place for negotiation; anticipating the opponent's strategies and preparing responses; and setting deadlines. Always have a contingency plan to use if your initial strategy fails.

STRATEGY

I. Review ICF/MR, Department of Labor and other regulations concerning the legal rights of residents who work, or perform work related duties at the residential facility.

1. Prepare a list of instances where residents may help perform work without pay.

2. Prepare a list of instances where residents may not perform work without pay.

II. Contact Director of Residential Programming and set up meeting.

1. Prepare an agenda (see below) with our four basic requests:

(a) Residents should be paid the prevailing wage.

(b) Residents should receive all benefits regular employees receive.

(c) Residents need money management training.

(d) Residents should not be required to perform the same work as paid staff unless the administration agrees to first three requests.

2. Be sure the date for when the program is to become effective is negotiated.

III. Select people from our group who will be the negotiating team.

1. Consider--Sally Jones, city manager's assistant

Don Smith, from the school district

Carlos Mendoza, from the Super Store grocery chain

Norma Green, registered nurse and volunteer

IV. Plan who will testify as experts.

Agenda

1. Call the meeting to order.
2. Establish ground rules for meetings.
   (a) We want to present our whole argument before there is rebuttal.
   (b) Opponents may ask questions of our expert witnesses.
3. Decide how many times the group will need to meet and establish times.
4. Discussion of our proposals
   (a) Residents should be paid prevailing wage.
      1. Call expert witness to testify as to reasons why this is important to the self-respect of the person.
      2. Present figures showing what the prevailing wage is.
   (b) Residents should receive benefits.
   (c) Residents need money management training.
   (d) Specify when we want the above things to happen.
5. Institution's time to present its case.
   (a) Be prepared with good questions.
6. Arrive at some decisions and agreement.

CONTINGENCY PLAN

If negotiation hardens and no agreement can be reached, consider filing a law suit.

Negotiation

Step 1 Analyze the problem and specify desirable changes.

To analyze the problem, first, write a rough narrative description. Then synthesize it into a one-paragraph description of the problem.

Next, analyze the causes of the problem.

Finally, specify the changes that need to be made.

A. Write a rough narrative description of the problem.

B. Write a one paragraph description of the problem.

C. Analyze the causes of the problem.

D. Specify the changes that need to be made.

Negotiation

Step 2 Identify the person who needs to respond.

To identify the person who needs to respond, look for the source of power closest to the problem. For example, if the problem is one with the local school district, try the local school principal first. Then go to the administrative personnel in the school district in this order: director of special education, assistant superintendent, and superintendent. The board of education is the final local agency with power. If all fails on the local level, the next step is to contact the state education agency.

Determine the specific person in any office you contact who has authority to deal.

Identify the person who needs to respond.

Negotiation

Step 3 Analyze your strengths and weaknesses and your opponent's.

Strengths and weaknesses relate to:

1. knowledge
2. organization
3. money
4. time
5. law (case law, statutory law, regulations)
6. popular support
7. influential support (news media, elected officials)
8. risks and rewards (who has less to lose and most to gain)

A. Identify your opponent's strengths and weaknesses.

strengths weaknesses

B. Identify your strengths and weaknesses.

strengths weaknesses

Negotiation

Step 4 Identify the reasons for the adversary's opposition.

Here are some reasons why your adversary may oppose you:

1. doesn't see any problem
2. doesn't want to change
3. disagrees with what needs to be changed
4. is satified with things the way they are
5. is worried about losing what is already good
6. feels threatened by change of any sort—not flexible
7. feels threatened by involvement of others—particularly those who are consumers and who speak a different language
8. fears censure from friends, co-workers
9. is overwhelmed by the problem
10. is committed to long-established habits and procedures
11. feels the cost is too great

Note here the reasons why you think your adversary is opposed to your proposals.

The opposition says: The reasons are:

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Negotiation

Step 5 Plan strategy.

Your strategy is your plan for action. It specifies the methods you will use to get your opponent to agree to the changes you have proposed. Such methods may include researching facts; calling expert witnesses; preparing an agenda, rules, and questions; selecting negotiators; determining concessions and threats; establishing a favorable date, time, and place for negotiation; anticipating the opponent's strategies and preparing responses; and setting deadlines. Always have a contingency plan to use if your initial strategy fails.

Session 5

Resources

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